

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
401866895
Date Received:
12/10/2018

FIR RESOLUTION FORM

CA Summary:
2 of 2 CAs from the FIR responded to on this Form
2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10550
Name of Operator: MUSTANG RESOURCES LLC
Address: 1660 LINCOLN STREET SUITE 1450
City: DENVER State: CO Zip: 80264
Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name Phone Email
Deb Lemon 750-550-7507 ext 105 dlemon@mustangresourcesllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689302535
Inspection Date: 12/06/2018 FIR Submit Date: 12/06/2018 FIR Status:

Inspected Operator Information:

Company Name: MUSTANG RESOURCES LLC Company Number: 10550
Address: 1660 LINCOLN STREET SUITE 1450
City: DENVER State: CO Zip: 80264

LOCATION - Location ID: 311543

Location Name: CLOUGH FEDERAL-66S94W Number: 14SESW County: GARFIELD
Qtrqr: SESW Sec: 14 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.520018 Longitude: -107.858547

FACILITY - API Number: 05-045-00 Facility ID: 210685

Facility Name: CLOUGH FEDERAL Number: 14-24A-6S-94W
Qtrqr: SESW Sec: 14 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.520018 Longitude: -107.858547

CORRECTIVE ACTIIONS:

1 CA# 120802

Corrective Action: Install sign to comply with Rule 210.d. Date: 01/06/2019

Response: CA COMPLETED Date of Completion: 12/07/2018

Operator Comment: Tank size added to sign.

COGCC Decision: Approved via an AMI

COGCC
Representative:

2 CA# 120803

Corrective Action: Install sign to comply with Rule 210.b.

Date: 01/06/2019

Response: CA COMPLETED

Date of Completion: 12/07/2018

Operator
Comment: County Road access information added to sign.

COGCC Decision: Approved via an AMI

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Tank size added to sign. County Road access information added to sign. See attached photos.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Deb Lemon

Signed: _____

Title: Regulatory Manager

Date: 12/10/2018 10:39:29 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
401866895	FIR RESOLUTION SUBMITTED
401866926	Photos

Total Attach: 2 Files