

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:
402537858

Date Received:
11/23/2020

FIR RESOLUTION FORM

Overall Status: CAC

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
<u>Deb lemon</u>	<u>720-550-7507 ext 105</u>	<u>dlemon@mustangresourcesllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700701852
Inspection Date: 11/09/2020 FIR Submit Date: 11/09/2020 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: 311542

Location Name: WF CLOUGH FEDERAL-66S94W Number: 14SESW County: _____
Qtrqtr: SESW Sec: 14 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.520279 Longitude: -107.858079

FACILITY - API Number: 05-045-00 Facility ID: 311542

Facility Name: WF CLOUGH FEDERAL-66S94W Number: 14SESW
Qtrqtr: SESW Sec: 14 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.520279 Longitude: -107.858079

CORRECTIVE ACTIONS:

1 CA# 144271

Corrective Action: provide quantity on tank Date: 11/30/2020

Response: CA COMPLETED Date of Completion: 11/20/2020

Operator Comment: Work completed. See attached photos.

COGCC Decision: _____

COGCC
Representative:

2 CA# 144272

Corrective Action: Control potential sediment discharges from operational roads, well pads, and other unpaved surfaces.

Date: 11/30/2020

Response: CA COMPLETED

Date of Completion: 11/20/2020

Operator Comment: Work completed. See attached photos.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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: 11/23/2020 9:03:12 AM

ATTACHMENT LIST

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

Document Number **Description**

402537859	Photos
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Total Attach: 1 Files