

State of Colorado  
Energy & Carbon Management Commission



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

Document Number:

403488650

Date Received:

08/11/2023

## FIR RESOLUTION FORM

**Overall Status:**

CA Summary:

2 of 9 CAs from the FIR responded to on this Form

2 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

OGCC Operator Number: 83555

Name of Operator: SUNBURST INC

Address: P.O. BOX 140266

City: EDEGEWATER State: CO Zip: 80214

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) Fax: ( )

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Jackson, Jay

(303) 781-3044

sun1045@aol.com

### OGCC INSPECTION SUMMARY:

FIR Document Number: 702501379

Inspection Date: 05/24/2023

FIR Submit Date: 05/25/2023

FIR Status: \_\_\_\_\_

### Inspected Operator Information:

Company Name: SUNBURST INC

Company Number: 83555

Address: P.O. BOX 140266

City: EDEGEWATER State: CO Zip: 80214

### LOCATION - Location ID: 312957

Location Name: COTTONWOOD GULCH Number: 36NWNE County: MOFFAT  
STATE A-68N91W

Qtrqr: NWNE Sec: 36 Twp: 8N Range: 91W Meridian: 6

Latitude: 40.613960 Longitude: -107.551085

### FACILITY - API Number: 05-081- -00 Facility ID: 223022

Facility Name: COTTONWOOD GULCH Number: 1  
STATE A

Qtrqr: NWNE Sec: 36 Twp: 8N Range: 91W Meridian: 6

Latitude: 40.613960 Longitude: -107.551085

### CORRECTIVE ACTIONS:

3 CA# 171483

Corrective Action: The Wellhead sign will identify: The Well name; The API number; and Its legal location, including the quarter/quarter section.

Date: 07/24/2023

Response: CA COMPLETED

Date of Completion: 06/08/2023

Operator  
Comment:

Wellhead sign has been updated.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

8 CA# 171488

Corrective Action: The Operator will conspicuously post and maintain the date of the last meter calibration in a legible condition at each meter at all times.

Date: 06/04/2023

Response: CA COMPLETED

Date of Completion: 06/07/2023

Operator  
Comment:

Meter calibration ticket has been placed with meter.

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: Jessica Donahue

Signed: \_\_\_\_\_

Title: Compliance Specialist

Date: 8/11/2023 1:40:50 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 0 Files