

State of Colorado  
Energy & Carbon Management Commission



Document Number:  
403568682

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

Date Received:  
10/23/2023

**FIR RESOLUTION FORM**

**Overall Status:**

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: 10690  
Name of Operator: IMPETRO RESOURCES LLC  
Address: 558 CASTLE PINES PKWY UNIT B-4  
City: CASTLE PINES State: CO Zip: 80108

Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name	Phone	Email
<u>Bongers, Brent</u>		<u>bbongers@impetroresources.com</u>

**COGCC INSPECTION SUMMARY:**

FIR Document Number: 688302525  
Inspection Date: 09/24/2018 FIR Submit Date: 09/30/2018 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: WARD & SON\* ALFRED Company Number: 94300  
Address: P O BOX 737  
City: OGALLALLA State: NE Zip: 69153

LOCATION - Location ID: 316968

Location Name: PIERCE-63S56W Number: 9SWSW County: WASHINGTON  
Qtrqtr: SWS Sec: 9 Twp: 3S Range: 56W Meridian: 6  
W  
Latitude: 39.800460 Longitude: -103.665790

FACILITY - API Number: 05-121-00 Facility ID: 233588

Facility Name: PIERCE Number: 1  
Qtrqtr: SWS Sec: 9 Twp: 3S Range: 56W Meridian: 6  
W  
Latitude: 39.800460 Longitude: -103.665790

CORRECTIVE ACTIONS:

**1** CA# 119135

Corrective Action: For localized spotting of oily waste - Properly treat or dispose of oily waste in accordance with 907.e.

Date: 10/31/2018

Response: CA COMPLETED Date of Completion: 08/10/2020

Reinspection done 8/10/2020, Document #688308338, Reinspection Passed.

Operator  
Comment:

COGCC Decision:

COGCC  
Representative:

**2** CA# 119136

Corrective Action: Contact COGCC EPS.

Date: 10/08/2018

Response: CA COMPLETED

Date of Completion: 08/10/2020

Operator  
Comment:

Reinspection done 8/10/2020, Document #688308338, Reinspection Passed.

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: Amber Barnett

Signed:

Title: Compliance Specialist

Date: 10/23/2023 9:29:14 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>

Total Attach: 0 Files