

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:
403614891

Date Received:
12/05/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 4 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10633
Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC
Address: 555 17TH STREET SUITE 3700
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Luke Kelly</u>	<u>970-939-6353</u>	<u>lkelly@civiresources.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 709400633
Inspection Date: 11/08/2023 FIR Submit Date: 12/04/2023 FIR Status: _____

Inspected Operator Information:

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Company Number: 10633
Address: 1801 CALIFORNIA STREET #2500
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 465461

Location Name: STATE MASSIVE Number: 5-65 2-3 County: _____
Qtrqtr: SENE Sec: 2 Twp: 5S Range: 65W Meridian: 6
Latitude: 39.647654 Longitude: -104.623836

FACILITY - API Number: 05-005-00 Facility ID: 465461

Facility Name: STATE MASSIVE Number: 5-65 2-3
Qtrqtr: SENE Sec: 2 Twp: 5S Range: 65W Meridian: 6
Latitude: 39.647654 Longitude: -104.623836

CORRECTIVE ACTIONS:

4 CA# 188834

Corrective Action: Comply with rule 1002.f. Stormwater Management. The corrective date is not intended to be the date for which the Operator shall complete the corrective actions but rather the corrective date the location was observed out of compliance. Date: 11/08/2023

Response: CA COMPLETED Date of Completion: 12/05/2023

Operator Comment: Operator repaired BMP's in accordance with 1002.f.(2) to prevent erosion, run-on/ off of location. Location is now in compliance with rule 1002.f. Stormwater Management.

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: Ashley Noonan

Signed: _____

Title: Sr Regulatory Analyst

Date: 12/5/2023 10:59:41 AM

ATTACHMENT LIST

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

Document Number **Description**

403614896	CA Resolution Photos
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Total Attach: 1 Files