

State of Colorado
Energy & Carbon Management Commission



Document Number:
403625997

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

Date Received:
12/15/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 6 CAs from the FIR responded to on this Form

1 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

COGCC INSPECTION SUMMARY:

FIR Document Number: 702502113

Inspection Date: 11/08/2023

FIR Submit Date: 11/10/2023

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

Qtrqtr: 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

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

Latitude: 40.613960 Longitude: -107.551085

CORRECTIVE ACTIONS:

4 CA# 188107

Corrective Action: The Tank battery sign will be no less than 3 square feet and no more than 6 square feet, and will provide: Name of the Operator; Telephone number at which the Operator can be reached at all times; Telephone number for local emergency services (911 where available); The public road used to access the Tank battery site; Well name(s) and API number(s) associated with the Tank battery and the legal location of the Well (s); and Location, including the quarter/quarter section, of the Tank battery.

Date: 06/24/2023

Response: CA COMPLETED

Date of Completion: 12/11/2023

Tank battery sign has been installed.

Operator
Comment:

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: 12/15/2023 7:49:04 AM

ATTACHMENT LIST

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

Document Number **Description**

403626021	Photo
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Total Attach: 1 Files