

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:

402462065

Date Received:

08/07/2020

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: 200077

Name of Operator: CHARLES P DUNNING LLC

Address: PO BOX 1365

City: FORT MORGAN State: CO Zip: 80701

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Dunning, Chuck

Phone

303-408-2575

Email

chuck.dunning@me.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 687400818

Inspection Date: 07/29/2020

FIR Submit Date: 07/29/2020

FIR Status: _____

Inspected Operator Information:

Company Name: CHARLES P DUNNING LLC

Company Number: 200077

Address: PO BOX 1365

City: FORT MORGAN State: CO Zip: 80701

LOCATION - Location ID: 319644

Location Name: JOLLY-PLATTS-63S58W Number: 34NWSW County: _____

Qtrqr: NWS Sec: 34 Twp: 3S Range: 58W Meridian: 6
W

Latitude: 39.744847 Longitude: -103.866168

FACILITY - API Number: 05-001- -00 Facility ID: 319644

Facility Name: JOLLY-PLATTS-63S58W Number: 34NWSW

Qtrqr: NWS Sec: 34 Twp: 3S Range: 58W Meridian: 6
W

Latitude: 39.744847 Longitude: -103.866168

CORRECTIVE ACTIONS:

1 ☒ CA# 140842

Corrective Action: Comply with Rule 603.f .

Date: 08/28/2020

Response: CA COMPLETED

Date of Completion: 08/02/2020

Operator
Comment:

All deficiencies have been corrected to the best of my knowledge.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 ☒ CA# 140843

Corrective Action: Repair or install berms or other secondary containment devices per Rule 906.d.(1).

Date: 08/28/2020

Response: CA COMPLETED

Date of Completion: 08/02/2020

Operator
Comment: All deficiencies have been corrected to the best of my knowledge.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: All deficiencies have been corrected to the best of my knowledge.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Chuck Dunning

Signed: _____

Title: Owner

Date: 8/7/2020 11:58:05 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>
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402462065	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files