

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:

403711382

Date Received:

03/26/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 96850

Name of Operator: TEP ROCKY MOUNTAIN LLC

Address: 1058 COUNTY ROAD 215

City: PARACHUTE State: CO Zip: 81635

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

TEP

COGCCInspectionReports@terraep.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 708901954

Inspection Date: 10/12/2023

FIR Submit Date: 10/14/2023

FIR Status: _____

Inspected Operator Information:

Company Name: TEP ROCKY MOUNTAIN LLC

Company Number: 96850

Address: 1058 COUNTY ROAD 215

City: PARACHUTE State: CO Zip: 81635

LOCATION - Location ID: 323946

Location Name: COOK-66S94W Number: 33NENW County: _____

Qtrqtr: NENW Sec: 33 Twp: 6S Range: 94W Meridian: 6

Latitude: 39.487379 Longitude: -107.895800

FACILITY - API Number: 05-045-00 Facility ID: 323946

Facility Name: COOK-66S94W Number: 33NENW

Qtrqtr: NENW Sec: 33 Twp: 6S Range: 94W Meridian: 6

Latitude: 39.487379 Longitude: -107.895800

CORRECTIVE ACTIONS:

1 CA# 185104

Corrective Action: Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to control stormwater runoff in a manner that minimizes erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved.

Date: 10/29/2023

Response: CA COMPLETED

Date of Completion: 11/08/2023

Operator
Comment:

Pad has been bladed/graded and stabilized. Corrective Action complete.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Pad has been bladed/graded and stabilized. Corrective Action complete.

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

Print Name: Jordan Veith

Signed: _____

Title: TEP Representative

Date: 3/26/2024 5:21:58 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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Total Attach: 0 Files