

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:

403747787

Date Received:

04/09/2024

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

ECMC Operator Number: 96340

Name of Operator: WIEPKING-FULLERTON ENERGY LLC

Address: PO BOX 460928

City: DENVER State: CO Zip: 80246

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Hayden Wambach

303-514-0757

haldeoil@hotmail.com

operations@wf.energy

ECMC INSPECTION SUMMARY:

FIR Document Number: 709400958

Inspection Date: 03/12/2024

FIR Submit Date: 03/18/2024

FIR Status: _____

Inspected Operator Information:

Company Name: WIEPKING-FULLERTON ENERGY LLC

Company Number: 96340

Address: PO BOX 460928

City: DENVER State: CO Zip: 80246

LOCATION - Location ID: 451940

Location Name: Raptor Number: 16 County: _____

Qtrqtr: SWS Sec: 18 Twp: 10S Range: 55W Meridian: 6
W

Latitude: 39.173270 Longitude: -103.600880

FACILITY - API Number: 05-073-00 Facility ID: 451940

Facility Name: Raptor Number: 16

Qtrqtr: SWS Sec: 18 Twp: 10S Range: 55W Meridian: 6
W

Latitude: 39.173270 Longitude: -103.600880

CORRECTIVE ACTIONS:

1 CA# 193235

Corrective Action: Comply with rule 912. Spills

Date: 03/26/2024

Response: CA COMPLETED

Date of Completion: 03/15/2024

Operator
Comment:

Operator has cleaned surface location and addressed any possible leak paths.

ECMC Decision: _____

ECMC
Representative:

2 CA# 193236

Corrective Action: Comply with rule 902.b operator must prevent wildlife adverse impacts.

Date: 03/26/2024

Response: CA COMPLETED

Date of Completion: 03/15/2024

Operator
Comment:

Operator has covered chemical totes to protect against wildlife.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Operator has addressed all inspection corrective action items.

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

Print Name: Hayden Wambach

Signed: _____

Title: VP Operations

Date: 4/9/2024 10:56:35 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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Total Attach: 0 Files