

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:
403744324

Date Received:
04/05/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 61250
Name of Operator: MULL DRILLING COMPANY INC
Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-6637

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>OBryhim, Reesa</u>		<u>robryhim@mulldrilling.com</u>
<u>Damme, Dustin</u>		<u>dustin@mullcompanies.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 713600867
Inspection Date: 03/26/2024 FIR Submit Date: 03/29/2024 FIR Status: _____

Inspected Operator Information:

Company Name: MULL DRILLING COMPANY INC Company Number: 61250
Address: 1700 N WATERFRONT PKWY B#1200
City: WICHITA State: KS Zip: 67206-6637

LOCATION - Location ID: 321574

Location Name: MULL UNIT-614S49W Number: 9NWNE County: CHEYENNE
Qtrqr: NWNE Sec: 9 Twp: 14S Range: 49W Meridian: 6
Latitude: 38.849020 Longitude: -102.894500

FACILITY - API Number: 05-017-00 Facility ID: 207334

Facility Name: MULL UNIT Number: 18
Qtrqr: NWNE Sec: 9 Twp: 14S Range: 49W Meridian: 6
Latitude: 38.849020 Longitude: -102.894500

CORRECTIVE ACTIONS:

1 CA# 193731

Corrective Action: Control and contain spills/releases and clean up per Rule 912.a. Report spill or release of E&P waste or produced fluids Remove free fluids and contact EPS staff per Rule 912.b. 24 hours for notification and 72 hours for Initial Form 19 Report.

Date: _____

Response: CA COMPLETED Date of Completion: 03/29/2024

Form 19, Document # 403736045 was submitted on 3/29/2024. Notifications were made within 24hrs of Inspection indicating potential spill.

Operator
Comment:

ECMC Decision: Approved pending re-inspection

ECMC
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: Amber Barnett

Signed: _____

Title: Compliance Specialist

Date: 4/5/2024 9:35:52 AM

ATTACHMENT LIST

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

Document Number **Description**

403744324	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files