

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:

403769939

Date Received:

04/25/2024

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: 10433

Name of Operator: LARAMIE ENERGY LLC

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

LARAMIE

cogccnotifications@laramie-energy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 708301478

Inspection Date: 01/03/2024

FIR Submit Date: 01/05/2024

FIR Status: _____

Inspected Operator Information:

Company Name: LARAMIE ENERGY LLC

Company Number: 10433

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

LOCATION - Location ID: 334427

Location Name: Piceance Number: 28-05 Pad County: _____

Qtrqtr: SWN Sec: 28 Twp: 9S Range: 93W Meridian: 6
W

Latitude: 39.251250 Longitude: -107.779610

FACILITY - API Number: 05-077-00 Facility ID: 334427

Facility Name: Piceance Number: 28-05 Pad

Qtrqtr: SWN Sec: 28 Twp: 9S Range: 93W Meridian: 6
W

Latitude: 39.251250 Longitude: -107.779610

CORRECTIVE ACTIONS:

1 ☒ CA# 189858

Corrective Action: 1002.f.(2): 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 pursuant to Rule 1004.

Date: 08/19/2023

Response: CA COMPLETED

Date of Completion: 04/19/2024

Site has been bladed.

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: Lori Muhr Signed: _____

Title: Regulatory Specialist Date: 4/25/2024 2:12:32 PM

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>
403769939	FIR RESOLUTION SUBMITTED
403769950	CA Photos

Total Attach: 2 Files