

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:

403723010

Date Received:

03/18/2024

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

ECMC Operator Number: 10227
Name of Operator: CHOLLA PETROLEUM INC

Address: 12404 PARK CENTRAL DR STE 380S

City: DALLAS State: TX Zip: 75251

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Tom Obenchain

Phone

214-455-4614

Email

tao@chollapetro.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 701007848

Inspection Date: 12/27/2023

FIR Submit Date: 12/27/2023

FIR Status: _____

Inspected Operator Information:

Company Name: CHOLLA PETROLEUM INC

Company Number: 10227

Address: PO BOX 12208

City: DALLAS State: TX Zip: 75225

LOCATION - Location ID: 321242

Location Name: SANTA FE TRAIL-622S48W Number: 34NENE County: BENT

Qtrqtr: NENE Sec: 34 Twp: 22S Range: 48W Meridian: 6

Latitude: 38.096900 Longitude: -102.782360

FACILITY - API Number: 05-011- -00 Facility ID: 271187

Facility Name: SANTA FE TRAIL Number: 1-34

Qtrqtr: NENE Sec: 34 Twp: 22S Range: 48W Meridian: 6

Latitude: 38.096900 Longitude: -102.782360

CORRECTIVE ACTIONS:

1 CA# 189563

Corrective Action: Continue with final reclamation

Date: _____

Response: CA COMPLETED

Date of Completion: 11/06/2023

Operator
Comment:

Final Reclamation Sundry (Doc.403585342) submitted 11/06/2023. Final reclamation has been completed and the site is going to enter annual monitoring to track vegetation growth. Annual Final Reclamation inspections will begin during the 2024 growing season.

Reclamation Specialist Comment: "A follow-up inspection will be performed during the growing season to evaluate crop cover and final reclamation."

ECMC Decision: _____

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: Ashley Noonan

Signed: _____

Title: Sr. Regulatory Analyst

Date: 3/18/2024 1:18:29 PM

ATTACHMENT LIST

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

Document Number **Description**

403723010	FIR RESOLUTION SUBMITTED
-----------	--------------------------

Total Attach: 1 Files