

State of Colorado  
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:  
403804808

Date Received:  
05/28/2024

## 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: 56680  
Name of Operator: MERRION OIL & GAS CORP

Address: 610 REILLY AVENUE

City: FARMINGTON State: NM Zip: 87401

#### Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) Fax: ( )

Email: \_\_\_\_\_

#### Additional Operator Contact:

| Contact Name      | Phone      | Email                |
|-------------------|------------|----------------------|
| Thompson, Philana | 5054861171 | pthompson@merrion.bz |

### ECMC INSPECTION SUMMARY:

FIR Document Number: 714000734

Inspection Date: 05/02/2024

FIR Submit Date: 05/06/2024

FIR Status: \_\_\_\_\_

#### Inspected Operator Information:

Company Name: MERRION OIL & GAS CORP

Company Number: 56680

Address: 610 REILLY AVENUE

City: FARMINGTON State: NM Zip: 87401

#### LOCATION - Location ID: 333388

Location Name: B E BEHRMANN-N33N7W Number: 15NWSE County: LA PLATA

Qtrqtr: NWSE Sec: 15 Twp: 33N Range: 7W Meridian: N

Latitude: 37.101040 Longitude: -107.592490

#### FACILITY - API Number: 05-067-00 Facility ID: 214096

Facility Name: B E BEHRMANN Number: 1

Qtrqtr: NWSE Sec: 15 Twp: 33N Range: 7W Meridian: N

Latitude: 37.101040 Longitude: -107.592490

### CORRECTIVE ACTIONS:

1 CA# 194928

Corrective Action: Comply with rule 1003.f

Date: 05/13/2024

Response: CA COMPLETED

Date of Completion: 05/09/2024

Operator Comment: This location was sprayed on 5/9/2024 by the Ditch Co.

ECMC Decision: \_\_\_\_\_

|                      |  |
|----------------------|--|
| ECMC Representative: |  |
|----------------------|--|

|   |                             |
|---|-----------------------------|
| <u>OPERATOR COMMENT AND SUBMITTAL</u>   |                             |
| Comment:  |                             |
| I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete. |                             |
| Print Name: Philana Thompson  | Signed: _____               |
| Title: HSE & Regulatory Complian  | Date: 5/28/2024 12:18:23 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> |
|------------------------|--------------------|
|                        |                    |

Total Attach: 0 Files