

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:

403815788

Date Received:

06/06/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10699

Name of Operator: OWN RESOURCES OPERATING LLC

Address: 305 S RIDGE STREET #6279

City: BRECKENRIDGE State: CO Zip: 80424

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

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Dolezal, Pat

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ECMC INSPECTION SUMMARY:

FIR Document Number: 709100286

Inspection Date: 04/24/2024

FIR Submit Date: 05/07/2024

FIR Status: _____

Inspected Operator Information:

Company Name: OWN RESOURCES OPERATING LLC

Company Number: 10699

Address: 305 S RIDGE STREET #6279

City: BRECKENRIDGE State: CO Zip: 80424

LOCATION - Location ID: 337803

Location Name: KNODEL-64S42W Number: 16SWSW County: _____

Qtrqtr: SWS Sec: 16 Twp: 4S Range: 42W Meridian: 6

Latitude: 39.707160 Longitude: -102.080270

FACILITY - API Number: 05-125- -00 Facility ID: 337803

Facility Name: KNODEL-64S42W Number: 16SWSW

Qtrqtr: SWS Sec: 16 Twp: 4S Range: 42W Meridian: 6

Latitude: 39.707160 Longitude: -102.080270

CORRECTIVE ACTIONS:

1 CA# 194951

Corrective Action: Control and contain spills/releases and clean up per Rule 912.a.

Date: 07/07/2024

Response: CA COMPLETED

Date of Completion: 05/10/2024

Date Run: 6/6/2024 Doc [#403815788]

Operator
Comment: Stained soil has been removed and replaced

ECMC Decision: _____

ECMC
Representative: _____

2 CA# 194952

Corrective Action: Operator shall remediate the historic release by delineating horizontal and vertical extent of impacted area using the Table 915-1 Protection of Groundwater Soil Screening Level Concentrations and remediate impacts to Table 915-1 standards. Documentation must include a figure showing spill area with sample locations plus laboratory results. This informations shall be submitted within the next Form 27 submittal.

Date: 06/07/2024

Response: CA COMPLETED Date of Completion: 06/10/2024

Operator
Comment: Not a potential salt kill, area observed is erosion leading off location.

ECMC Decision: _____

ECMC
Representative: _____

3 CA# 194953

Corrective Action: Comply with Rule 606.

Date: 08/07/2024

Response: CA COMPLETED Date of Completion: 06/10/2024

Operator
Comment: Unused equipment has been re installed

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: Pat Dolezal

Signed: _____

Title: Regulatory Specialist

Date: 6/6/2024 10:40:37 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