

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:

403933853

Date Received:

09/26/2024

## 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: 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

Krystal Heibel

krystal.heibel@state.co.us

Kyle Waggoner

kyle.waggoner@state.co.us

Dolezal, Pat

pat.dolezal@ownresources.com

**ECMC INSPECTION SUMMARY:**

FIR Document Number: 709100406

Inspection Date: 09/10/2024

FIR Submit Date: 09/17/2024

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: 304317**

Location Name: STALLINGS-61N47W Number: 12NWNE County: \_\_\_\_\_

Qtrqtr: NWNE Sec: 12 Twp: 1N Range: 47W Meridian: 6

Latitude: 40.073670 Longitude: -102.575050

**FACILITY - API Number: 05-125- -00 Facility ID: 304317**

Facility Name: STALLINGS-61N47W Number: 12NWNE

Qtrqtr: NWNE Sec: 12 Twp: 1N Range: 47W Meridian: 6

Latitude: 40.073670 Longitude: -102.575050

**CORRECTIVE ACTIONS:**

1 CA# 198817

Corrective Action: Securely fasten all valves, pipes, fittings, and Production Facilities to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 608.e.

Date: 10/17/2024

Response: CA COMPLETED

Date of Completion: 09/24/2024

Area foreman inspected location and found that all valves, pipes, fittings and production facilities with no issues found. This location is inspected on regular intervals and is in good mechanical condition.

Operator Comment:	
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: Pat Dolezal	Signed:
Title: Regulatory Specialist	Date: 9/26/2024 7:32:43 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>
403933853	FIR RESOLUTION SUBMITTED
403935118	Location photo

Total Attach: 2 Files