

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:
404102416

Date Received:
03/06/2025

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: 96850
Name of Operator: TEP ROCKY MOUNTAIN LLC
Address: 1058 COUNTY ROAD 215
City: PARACHUTE State: CO Zip: 81635

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Toews, Wesley</u>		<u>wtoews@blm.gov</u>
<u>Haverkamp, Curtis</u>		<u>curtis.haverkamp@state.co.us</u>
<u>.TEP</u>		<u>COGCCInspectionReports@terraep.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 708905103
Inspection Date: 11/26/2024 FIR Submit Date: 11/26/2024 FIR Status: _____

Inspected Operator Information:

Company Name: TEP ROCKY MOUNTAIN LLC Company Number: 96850
Address: 1058 COUNTY ROAD 215
City: PARACHUTE State: CO Zip: 81635

LOCATION - Location ID: 335136

Location Name: FEDERAL-66S94W Number: 20NENE County: _____
Qtrqtr: NENE Sec: 20 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.517053 Longitude: -107.905106

FACILITY - API Number: 05-045-00 Facility ID: 335136

Facility Name: FEDERAL-66S94W Number: 20NENE
Qtrqtr: NENE Sec: 20 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.517053 Longitude: -107.905106

CORRECTIVE ACTIONS:

1 CA# 200739

Corrective Action: All Production Facilities, valves, pipes, fittings, and vessels will be securely fastened or sealed, inspected at regular intervals, and maintained in good mechanical condition. Date: 11/27/2024

Response: CA COMPLETED Date of Completion: 12/04/2024

Operator Comment: Piping has been securely fastened and there are no observed leaks. Corrective Action complete.

ECMC Decision: _____

ECMC
Representative:

--

OPERATOR COMMENT AND SUBMITTAL

Comment: Piping has been securely fastened and there are no observed leaks. Corrective Action complete.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Jordan Veith

Signed: _____

Title: TEP Representative

Date: 3/6/2025 1:04:45 PM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files