

# State of Colorado Energy & Carbon Management Commission



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Document Number:  
404120887

Date Received:  
03/10/2025

## FIR RESOLUTION FORM

**Overall Status:**

CA Summary:  
2 of 2 CAs from the FIR responded to on this Form  
2 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

ECMC Operator Number: 10133  
Name of Operator: HILCORP ENERGY COMPANY  
Address: P O BOX 61229  
City: HOUSTON State: TX Zip: 77208  
Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

**Additional Operator Contact:**

Contact Name	Phone	Email
<u>General</u>		<u>FarmingtonRegulatoryTechs@hilcorp.com</u>
<u>Shorty, Priscilla</u>	<u>505-324-5188</u>	<u>pshorty@hilcorp.com</u>
<u>Walker, Mandi</u>		<u>mwalker@hilcorp.com</u>

**ECMC INSPECTION SUMMARY:**

FIR Document Number: 714001873  
Inspection Date: 02/19/2025 FIR Submit Date: 02/25/2025 FIR Status: \_\_\_\_\_

**Inspected Operator Information:**

Company Name: HILCORP ENERGY COMPANY Company Number: 10133  
Address: P O BOX 61229  
City: HOUSTON State: TX Zip: 77208

**LOCATION** - Location ID: 306787

Location Name: Levey Number: 100 County: \_\_\_\_\_  
Qtrqtr: SENW Sec: 13 Twp: 32N Range: 7W Meridian: n  
Latitude: 37.020239 Longitude: -107.563219

**FACILITY** - API Number: 05-067-00 Facility ID: 306787

Facility Name: Levey Number: 100  
Qtrqtr: SENW Sec: 13 Twp: 32N Range: 7W Meridian: n  
Latitude: 37.020239 Longitude: -107.563219

**CORRECTIVE ACTIONS:**

**1** CA# 202693

Corrective Action: Comply with rule 605. Install or repair sign. Date: 03/25/2025

Response: CA COMPLETED Date of Completion: 03/07/2025

Operator Comment: Tanks have been labeled. See attached photos.

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

ECMC Representative: \_\_\_\_\_

**2** CA# 202694

Corrective Action: Comply with rule 1002f. Install or repair required BMPs.

Date: 03/11/2025

Response: CA COMPLETED

Date of Completion: 03/07/2025

Operator Comment: Roads have been repaired. See attached photos.

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: Priscilla Shorty

Signed: \_\_\_\_\_

Title: OperationsRegulatory Tech

Date: 3/10/2025 10:03:52 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>
404120905	714001873 Resolved Photos

Total Attach: 1 Files