

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:

404155592

Date Received:

04/07/2025

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: 10633

Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Luke Kelly

970-939-6353

lkelly@civiresources.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 718600345

Inspection Date: 02/27/2025

FIR Submit Date: 03/14/2025

FIR Status: _____

Inspected Operator Information:

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC

Company Number: 10633

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 330344

Location Name: BARB LTD-61N68W Number: 30NWSE County: _____

Qtrqtr: NWSE Sec: 30 Twp: 1N Range: 68W Meridian: 6

Latitude: 40.020238 Longitude: -105.043987

FACILITY - API Number: 05-123- -00 Facility ID: 330344

Facility Name: BARB LTD-61N68W Number: 30NWSE

Qtrqtr: NWSE Sec: 30 Twp: 1N Range: 68W Meridian: 6

Latitude: 40.020238 Longitude: -105.043987

CORRECTIVE ACTIONS:

1 CA# 203318

Corrective Action: Control weeds on location and establish a uniform vegetative cover that reflects pre-disturbance or reference area forbs, shrubs, and grasses with total percent plant cover of at least eighty percent (80%) of pre-disturbance or reference area levels, excluding noxious weeds.

Date: _____

Response: CA COMPLETED

Date of Completion: 04/02/2025

Operator
Comment:

Operator has addressed the vegetation issue in order to comply with Rule 606.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA follow-up has been completed for this location.

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

Print Name: Aubrey Noonan

Signed: _____

Title: Sr Regulatory Analyst

Date: 4/7/2025 12:41:17 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>
404155592	FIR RESOLUTION SUBMITTED
404155599	Inspection Resolution

Total Attach: 2 Files