

State of Colorado Energy & Carbon Management Commission



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Document Number:
404214534

Date Received:
05/22/2025

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: 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
<u>Dolezal, Pat</u>	<u>970-332-3585</u>	<u>pat.dolezal@ownresources.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 698603070
Inspection Date: 01/15/2025 FIR Submit Date: 01/21/2025 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: 303641

Location Name: R M R RANCH-63N46W Number: 5SESW County: YUMA
Qtrqtr: SESW Sec: 5 Twp: 3N Range: 46W Meridian: 6
Latitude: 40.251891 Longitude: -102.540265

FACILITY - API Number: 05-125- -00 Facility ID: 253413

Facility Name: R M R RANCH Number: 2
Qtrqtr: SESW Sec: 5 Twp: 3N Range: 46W Meridian: 6
Latitude: 40.251891 Longitude: -102.540265

CORRECTIVE ACTIONS:

1 CA# 201936

Corrective Action: Install sign to comply with Rule 605.h. Date: 02/21/2025

Response: CA COMPLETED Date of Completion: 04/02/2025

Operator Comment: Produced water tank sign has been replaced. Operator has photos, but unable to attach properly

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: 5/22/2025 1:28:59 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