

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:  
404217241

Date Received:  
05/27/2025

**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: 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: 698603012  
Inspection Date: 01/13/2025 FIR Submit Date: 01/18/2025 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: 303499

Location Name: KORF-65N47W Number: 25NWSW County: YUMA  
Qtrqtr: NWS Sec: 25 Twp: 5N Range: 47W Meridian: 6  
W  
Latitude: 40.370840 Longitude: -102.566520

**FACILITY** - API Number: 05-125- -00 Facility ID: 253199

Facility Name: KORF Number: 2  
Qtrqtr: NWS Sec: 25 Twp: 5N Range: 47W Meridian: 6  
W  
Latitude: 40.370840 Longitude: -102.566520

**CORRECTIVE ACTIONS:**

**1** CA# 201887

Corrective Action: Install sign to comply with Rule 605.h. Date: 02/19/2025

Response: CA COMPLETED Date of Completion: 04/10/2025

Operator Comment: Sign was replaced

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

ECMC  
Representative:

2 CA# 201888

Corrective Action: Install sign to comply with Rule 605.e.

Date: 02/19/2025

Response: CA COMPLETED

Date of Completion: 03/06/2025

Operator  
Comment: Sign was replaced

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: 5/27/2025 7:23:57 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>
404217241	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files