

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:
404435562

Date Received:
11/13/2025

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>Kelly Sharp</u>		<u>kelly.sharp@ownresources.com</u>
<u>Azucena Torres</u>		<u>azucena.torres@ownresource.com</u>
<u>Krystal Heibel</u>		<u>krystal.heibel@state.co.us</u>
<u>Dolezal, Pat</u>		<u>pat.dolezal@ownresources.com</u>
<u>Kyle Waggoner</u>		<u>kyle.waggoner@state.co.us</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 709100575
Inspection Date: 10/15/2025 FIR Submit Date: 10/17/2025 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: 304410

Location Name: STALLINGS-61N46W Number: 6SWNW County: _____
Qtrqtr: SWN Sec: 6 Twp: 1N Range: 46W Meridian: 6
W
Latitude: 40.084400 Longitude: -102.566020

FACILITY - API Number: 05-125- -00 Facility ID: 304410

Facility Name: STALLINGS-61N46W Number: 6SWNW
Qtrqtr: SWN Sec: 6 Twp: 1N Range: 46W Meridian: 6
W
Latitude: 40.084400 Longitude: -102.566020

CORRECTIVE ACTIONS:

1 CA# 208782

Corrective Action: Repair or install berms or other secondary containment devices per Rule 912.d.(1).

Date: 11/07/2025

Response: CA COMPLETED

Date of Completion: 11/04/2025

Operator Comment: Berm around tank has been repaired

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: 11/13/2025 3:41:21 PM

ATTACHMENT LIST

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

Document Number **Description**

404435562	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files