

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:
404441741

Date Received:
11/18/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10775

Name of Operator: KT RESOURCES LLC

Address: 3381 WESTBROOK LANE

City: HIGHLANDS RANCH State: CO Zip: 80129

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
Karen Adams	3039161170	Adams@kt-res.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 715501361

Inspection Date: 03/04/2025

FIR Submit Date: 03/04/2025

FIR Status: _____

Inspected Operator Information:

Company Name: KT RESOURCES LLC

Company Number: 10775

Address: 3381 WESTBROOK LANE

City: HIGHLANDS RANCH State: CO Zip: 80129

LOCATION - Location ID: 316341

Location Name: ANT HILL UNIT-62N96W Number: 18SWSE County: RIO BLANCO

Qtrqr: SWSE Sec: 18 Twp: 2N Range: 96W Meridian: 6

Latitude: 40.136769 Longitude: -108.205221

FACILITY - API Number: 05-103-00 Facility ID: 267099

Facility Name: ANT HILL UNIT Number: 18-43

Qtrqr: SWSE Sec: 18 Twp: 2N Range: 96W Meridian: 6

Latitude: 40.136769 Longitude: -108.205221

CORRECTIVE ACTIONS:

2 CA# 202984

Corrective Action: Vents on pressure safety devices will terminate in a manner so as not to endanger the public or adjoining facilities. They will be designed to be clear and free of debris and water at all times.

Date: 03/20/2025

Response: CA COMPLETED

Date of Completion: 04/03/2025

Operator Comment: Replaced pressure safety device

ECMC Decision: _____

ECMC
Representative:

3 CA# 202985

Corrective Action: Meters will be calibrated annually unless more frequent calibration is required by contractual obligations or by the Director.

Date: 04/03/2025

Response: CA COMPLETED

Date of Completion: 09/25/2025

Operator
Comment:

Meter calibrated

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: Karen Adams

Signed: _____

Title: Admin

Date: 11/18/2025 8:22:46 PM

ATTACHMENT LIST

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

Document Number **Description**

404441741	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files