

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:
404460332

Date Received:
12/04/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10539
Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP
Address: 734 MAIN STREET 3RD FLOOR
City: GRAND JUNCTION State: CO Zip: 81501

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

| | | |
|------------------|-------|------------------------------------|
| Contact Name | Phone | Email |
| <u>GAS. UTAH</u> | | <u>inspections@utahgascorp.com</u> |

ECMC INSPECTION SUMMARY:

FIR Document Number: 719500652
Inspection Date: 11/11/2025 FIR Submit Date: 11/19/2025 FIR Status: _____

Inspected Operator Information:

Company Name: UTAH GAS OP LTD DBA UTAH GAS CORP Company Number: 10539
Address: 734 MAIN STREET 3RD FLOOR
City: GRAND JUNCTION State: CO Zip: 81501

LOCATION - Location ID: 322294

Location Name: SOUTH CANYON-FEDERAL-67S103W Number: 7NWSE County: _____
Qtrqtr: NWSE Sec: 7 Twp: 7S Range: 103W Meridian: 6
Latitude: 39.465564 Longitude: -108.915771

FACILITY - API Number: 05-045-00 Facility ID: 322294

Facility Name: SOUTH CANYON-FEDERAL-67S103W Number: 7NWSE
Qtrqtr: NWSE Sec: 7 Twp: 7S Range: 103W Meridian: 6
Latitude: 39.465564 Longitude: -108.915771

CORRECTIVE ACTIONS:

2 CA# 209537

Corrective Action: Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to control Stormwater runoff in a manner that minimizes erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved. Date: 12/05/2025

Response: CA COMPLETED Date of Completion: 12/03/2025

Operator Comment: Erosion Complete

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: 2 of 2 CAs Complete.

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

Print Name: Tami Dahl

Signed: _____

Title: Production Tech

Date: 12/4/2025 12:26:23 PM

ATTACHMENT LIST

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

| Document Number | Description |
|------------------------|--------------------------|
| 404460332 | FIR RESOLUTION SUBMITTED |
| 404460344 | Road 1 |
| 404460345 | Road 2 |
| 404460347 | Road 3 |
| 404460348 | Road 4 |

Total Attach: 5 Files