

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:
404582598

Date Received:
03/17/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 6 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10133
Name of Operator: HILCORP ENERGY COMPANY
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Labowskie, Steve</u>		<u>steve.labowskie@state.co.us</u>
<u>Blair, Jamie</u>		<u>jamie.blair@state.co.us</u>
<u>General</u>		<u>FarmingtonRegulatoryTechs@hilcorp.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 721100202
Inspection Date: 03/04/2026 FIR Submit Date: 03/04/2026 FIR Status:

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY Company Number: 10133
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

LOCATION - Location ID: 333603

Location Name: ANIMAS-M34N10W Number: 36NESW County: LA PLATA
Qtrqtr: NWS Sec: 36 Twp: 34N Range: 10W Meridian: M
W
Latitude: 37.144280 Longitude: -107.889780

FACILITY - API Number: 05-067-00 Facility ID: 261072

Facility Name: ANIMAS Number: 36-2
Qtrqtr: NWS Sec: 36 Twp: 34N Range: 10W Meridian: M
W
Latitude: 37.144280 Longitude: -107.889780

CORRECTIVE ACTIONS:

1 CA# 211352

Corrective Action: Collect and properly dispose of trash and debris from well pad and surrounding reclamation area to comply with 606.

Date: 03/18/2026

Response: CA COMPLETED

Date of Completion: 03/12/2026

Trash has been collected and disposed of properly off location. See attached photos.

Operator Comment: _____

ECMC Decision: _____

ECMC Representative: _____

4 CA# 211355

Corrective Action: Install sign by wellhead to comply with Rule 605.a.

Date: 04/06/2026

Response: CA COMPLETED

Date of Completion: 03/16/2026

Operator Comment: All the signs have been updated with new. See attached photo.

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: Priscilla Shorty Signed: _____

Title: OperationsRegulatoryTech Date: 3/17/2026 6:07:07 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>
404582599	ANIMAS 34-10-36 2 - INC - 721100202_2 CA RESOLVED

Total Attach: 1 Files