

State of Colorado
Energy & Carbon Management Commission



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Document Number:
404484130

Date Received:
03/24/2026

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: 96850
Name of Operator: TEP ROCKY MOUNTAIN LLC
Address: 1058 COUNTY ROAD 215
City: PARACHUTE State: CO Zip: 81635

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Schlagenhauf, Mark</u>		<u>mark.schlagenhauf@state.co.us</u>
<u>Inspection, Terra TEP</u>	<u>970-285-9377</u>	<u>ECMCInspectionReports@flywheelenergy.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 701104360
Inspection Date: 11/20/2025 FIR Submit Date: 12/02/2025 FIR Status:

Inspected Operator Information:

Company Name: TEP ROCKY MOUNTAIN LLC Company Number: 96850
Address: 1058 COUNTY ROAD 215
City: PARACHUTE State: CO Zip: 81635

LOCATION - Location ID: 335295

Location Name: RMV-66S94W Number: 20SWSE County:
Qtrqtr: SWSE Sec: 20 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.505929 Longitude: -107.910531

FACILITY - API Number: 05-045-00 Facility ID: 335295

Facility Name: RMV-66S94W Number: 20SWSE
Qtrqtr: SWSE Sec: 20 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.505929 Longitude: -107.910531

CORRECTIVE ACTIONS:

1 CA# 209696

Corrective Action: Replace label. Date: 01/02/2026

Response: CA COMPLETED Date of Completion: 12/09/2025

Operator Comment: A new label has been placed on the tank. Corrective Action complete.

ECMC Decision:

ECMC
Representative:

2 CA# 209697

Corrective Action: Replace or repair flapper.

Date: 01/02/2026

Response: CA COMPLETED

Date of Completion: 12/09/2025

Operator
Comment: A new rain cap has been installed. Corrective Action complete.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA# 209696: A new label has been placed on the tank. Corrective Action complete.
CA# 209697: A new rain cap has been installed. Corrective Action complete.

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

Print Name: Jordan Veith

Signed: _____

Title: TEP Representative

Date: 3/24/2026 4:18:48 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files