

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:  
404684316

Date Received:  
06/05/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

1 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10112  
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

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

Additional Operator Contact:

Contact Name	Phone	Email
		jsmith@foundationenergy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 712300315  
Inspection Date: 04/22/2026 FIR Submit Date: 05/12/2026 FIR Status:

Inspected Operator Information:

Company Name: FOUNDATION ENERGY MANAGEMENT LLC Company Number: 10112  
Address: 5057 KELLER SPRINGS RD STE 650  
City: ADDISON State: TX Zip: 75001

LOCATION - Location ID: 324639

Location Name: ALLARD-610N79W Number: 30SENE County:  
Qtrqtr: SENE Sec: 30 Twp: 10N Range: 79W Meridian: 6  
Latitude: 40.810919 Longitude: -106.299961

FACILITY - API Number: 05-057-00 Facility ID: 324639

Facility Name: ALLARD-610N79W Number: 30SENE  
Qtrqtr: SENE Sec: 30 Twp: 10N Range: 79W Meridian: 6  
Latitude: 40.810919 Longitude: -106.299961

CORRECTIVE ACTIONS:

2 CA# 212948

Corrective Action: Comply with Rule 606.d.- Remove all trash/equipment. Abandon monitoring wells with DWR and submit documentation that the wells have been abandoned. Date: 05/22/2026

Response: CA COMPLETED Date of Completion: 05/21/2026

Operator Comment: Tasman Geosciences removed the trash/equipment referenced in the inspection report. Monitoring wells that were abandon were done so in September and October of 2023 with the GWS-09 form being filed with CDPHE on 12/13/2023 (see attachment).

ECMC Decision:

ECMC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: See corrective actions

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

Print Name: James Smith

Signed: \_\_\_\_\_

Title: HSE-Regulatory Manager

Date: 6/5/2026 6:38:03 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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

Total Attach: 0 Files