

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
401883659
Date Received:
12/21/2018

FIR RESOLUTION FORM

CA Summary:

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

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10550
Name of Operator: MUSTANG RESOURCES LLC
Address: 1660 LINCOLN STREET SUITE 1450
City: DENVER State: CO Zip: 80264

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

Additional Operator Contact:

Contact Name	Phone	Email
Deb Lemon	7205507507 ext 105	dlemon@mustangresourcesllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689302563
Inspection Date: 12/10/2018 FIR Submit Date: 12/10/2018 FIR Status:

Inspected Operator Information:

Company Name: MUSTANG RESOURCES LLC Company Number: 10550
Address: 1660 LINCOLN STREET SUITE 1450
City: DENVER State: CO Zip: 80264

LOCATION - Location ID: 311532

Location Name: JUHAN ASTRAL FED FEE-66S94W Number: 26SESE County: GARFIELD
Qtrqtr: SESE Sec: 26 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.491802 Longitude: -107.849778

FACILITY - API Number: 05-045-00 Facility ID: 210187

Facility Name: JUHAN ASTRAL FED FEE Number: 1-26-6S-94W
Qtrqtr: SESE Sec: 26 Twp: 6S Range: 94W Meridian: 6
Latitude: 39.491802 Longitude: -107.849778

CORRECTIVE ACTIIONS:

1 CA# 120877

Corrective Action: Install sign to comply with Rule 210.b. Date: 01/10/2019

Response: CA COMPLETED Date of Completion: 12/18/2018

Operator Comment: Battery sign corrected. See attached photos.

COGCC Decision: Approved via an AMI

COGCC Representative:

[Empty text box for COGCC Representative]

2 CA# 120878

Corrective Action: Install sign to comply with Rule 210.d.

Date: 01/10/2019

Response: CA COMPLETED

Date of Completion: 12/18/2018

Operator Comment: Tank capacity added. See attached photos.

COGCC Decision: Approved via an AMI

COGCC Representative:

[Empty text box for COGCC Representative]

3 CA# 120879

Corrective Action: Mark as required.

Date: 01/10/2019

Response: CA COMPLETED

Date of Completion: 12/18/2018

Operator Comment: Deadman marked. See attached photos.

COGCC Decision: Approved via an AMI

COGCC Representative:

[Empty text box for COGCC Representative]

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective actions completed on or by 12/18/2018.

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

Print Name: Deb Lemon

Signed: _____

Title: Regulatory Manager

Date: 12/21/2018 1:08:02 AM

ATTACHMENT LIST

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

Document Number	Description
401883659	FIR RESOLUTION SUBMITTED
401883660	Photo #1 - marked deadman
401883661	Photo #2 - corrected sign
401883662	Photo #3 - corrected sign
401883663	Photo #4 - tank capacity

Total Attach: 5 Files