

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:  
403209806

Date Received:  
10/27/2022

## FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

1 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

OGCC Operator Number: 10433

Name of Operator: LARAMIE ENERGY LLC

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

Kellerby, Shaun

shaun.kellerby@state.co.us

Laramie

cogccnotifications@laramie-energy.com

Lori Muhr

LMuhr@Laramie-Energy.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 699805114

Inspection Date: 10/25/2022

FIR Submit Date: 10/26/2022

FIR Status: \_\_\_\_\_

### Inspected Operator Information:

Company Name: LARAMIE ENERGY LLC

Company Number: 10433

Address: 1700 LINCOLN ST STE 3950

City: DENVER State: CO Zip: 80203

### LOCATION - Location ID: 334544

Location Name: Blackman Number: 14-12 Pad County: \_\_\_\_\_

Qtrqr: NWS Sec: 14 Twp: 9S Range: 94W Meridian: 6

Latitude: 39.273111 Longitude: -107.856027

### FACILITY - API Number: 05-077- -00 Facility ID: 334544

Facility Name: Blackman Number: 14-12 Pad

Qtrqr: NWS Sec: 14 Twp: 9S Range: 94W Meridian: 6

Latitude: 39.273111 Longitude: -107.856027

### CORRECTIVE ACTIONS:

1 ☒ CA# 165727

Corrective Action: All Production Facilities, valves, pipes, fittings, and vessels will be securely fastened or sealed

Date: 10/27/2022

Response: CA COMPLETED

Date of Completion: 09/21/2022

We are under the impression that the tanks are uncontrolled and are allowed to vent. Please see the email

Operator Comment: attachment between Laramie and the CDPHE.

COGCC Decision: Approved pending re-inspection

COGCC  
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: Lori Muhr

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

Title: Regulatory Specialist

Date: 10/27/2022 7:54:44 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403209806	FIR RESOLUTION SUBMITTED
403209810	CDPHE Communication

Total Attach: 2 Files