

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:

403574124

Date Received:

10/26/2023

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

Laramie

cogccnotifications@laramie-energy.com

Fischer, Alex

alex.fischer@state.co.us

Arauza, Steven

steven.arauza@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 696205257

Inspection Date: 09/19/2023

FIR Submit Date: 09/21/2023

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: 383264

Location Name: Cascade Creek (CC) Number: 0610-21-41 County: _____

Qtrqtr: NENW Sec: 10 Twp: 6S Range: 97W Meridian: 6

Latitude: 39.544325 Longitude: -108.207010

FACILITY - API Number: 05-045- -00 Facility ID: 383264

Facility Name: Cascade Creek (CC) Number: 0610-21-41

Qtrqtr: NENW Sec: 10 Twp: 6S Range: 97W Meridian: 6

Latitude: 39.544325 Longitude: -108.207010

CORRECTIVE ACTIONS:

1 ☒ CA# 181736

Corrective Action: Clean/remediate stained soils to Table 915-1 cleanup standards.

Date: 08/04/2023

Response: CA COMPLETED

Date of Completion: 08/08/2023

Operator
Comment:

This has been addressed under spill ID 484892

COGCC Decision: Approved pending re-inspection

COGCC Representative: Approved pending re-inspection of this FIR resolution acknowledges the document was received. It is not an acknowledgement that the corrective action has been passed. A field inspection will be conducted at a future date to evaluate compliance with ECMC rules.

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: 10/26/2023 2:05:16 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403574124	FIR RESOLUTION SUBMITTED
403574138	CA Photos

Total Attach: 2 Files