

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:  
403752458

Date Received:  
06/10/2024

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

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

1 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

ECMC Operator Number: 10550

Name of Operator: MUSTANG RESOURCES LLC

Address: PO BOX 13550

City: BAKERSFIELD State: CA Zip: 93389

Contact Name and Telephone:

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

Phone: ( ) Fax: ( )

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

#### Additional Operator Contact:

Contact Name

Phone

Email

Nikola Welch

903-806-1309

nwelch@vaqueroenergy.com

Toews, Wesley

wtoews@blm.gov

### ECMC INSPECTION SUMMARY:

FIR Document Number: 708903514

Inspection Date: 04/11/2024

FIR Submit Date: 04/11/2024

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

#### Inspected Operator Information:

Company Name: MUSTANG RESOURCES LLC

Company Number: 10550

Address: PO BOX 13550

City: BAKERSFIELD State: CA Zip: 93389

#### LOCATION - Location ID: 322314

Location Name: RULISON FEDERAL-66S94W Number: 35SWNW County: \_\_\_\_\_

Qtrqtr: SWN Sec: 35 Twp: 6S Range: 94W Meridian: 6

Latitude: 39.484490 Longitude: -107.862379

#### FACILITY - API Number: 05-045-00 Facility ID: 322314

Facility Name: RULISON FEDERAL-66S94W Number: 35SWNW

Qtrqtr: SWN Sec: 35 Twp: 6S Range: 94W Meridian: 6

Latitude: 39.484490 Longitude: -107.862379

### CORRECTIVE ACTIONS:

1 CA# 194212

Corrective Action: The storage or placement of equipment and supplies not necessary for use on location is prohibited.

Date: 05/11/2024

Response: CA COMPLETED

Date of Completion: 04/25/2024

Operator Comment: The meter house is staged equipment for installation. Mustang will be installing telemetry equipment October 31, 2024 as instrumentation and electrical team is available. Please see Sundry 4 Form Document 403769842

ECMC Decision: \_\_\_\_\_

ECMC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: Corrective actions resolution provided

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

Print Name: Niko Welch

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

Title: Regulatory Manager

Date: 6/10/2024 12:10:30 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 0 Files