

**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:

403876256

Date Received:

08/05/2024

## 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: 10633

Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

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

Phone: ( ) Fax: ( )

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

**Additional Operator Contact:**

Contact Name

Luke Kelly

Phone

970-939-6353

Email

lkelly@civiresources.com

**ECMC INSPECTION SUMMARY:**

FIR Document Number: 714300104

Inspection Date: 06/27/2024

FIR Submit Date: 07/25/2024

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

**Inspected Operator Information:**

Company Name: CRESTONE PEAK RESOURCES OPERATING LLC

Company Number: 10633

Address: 555 17TH STREET SUITE 3700

City: DENVER State: CO Zip: 80202

**LOCATION - Location ID: 336456**

Location Name: WANDELL-62N67W Number: 7SWNE County: \_\_\_\_\_

Qtrqtr: SWNE Sec: 7 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.154904 Longitude: -104.930583

**FACILITY - API Number: 05-123- -00 Facility ID: 486884**

Facility Name: Wandell 33-7, 43-7, 32-7 Number: \_\_\_\_\_

Qtrqtr: SWNE Sec: 7 Twp: 2N Range: 67W Meridian: 6

Latitude: 40.154904 Longitude: -104.930583

**CORRECTIVE ACTIONS:**

1 CA# 196899

Corrective Action: Operator shall provide an updated Form 27 for Remediation #31476 with a workplan and timeline for remediation of Spill ID 486884.

Date: 08/08/2024

Response: CA COMPLETED

Date of Completion: 08/05/2024

Operator Comment: Form 27 Doc # 403876179 has been submitted for for Remediation #31476 with a workplan and timeline for remediation of Spill ID 486884.

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

ECMC Representative:	
----------------------	--

<b>OPERATOR COMMENT AND SUBMITTAL</b>	
Comment:	CA follow-up has been completed for this location.
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: Ashley Noonan	Signed: _____
Title: Sr Regulatory Analyst	Date: 8/5/2024 9:20:57 AM

**ATTACHMENT LIST**

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

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

Total Attach: 0 Files