

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:
403906600

Date Received:
08/30/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10133
Name of Operator: HILCORP ENERGY COMPANY

Address: P O BOX 61229

City: HOUSTON State: TX Zip: 77208

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Shorty, Priscilla

505-324-5188

pshorty@hilcorp.com

. General

FarmingtonRegulatoryTechs@hilcorp.com

Walker, Mandi

mwalker@hilcorp.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714001067

Inspection Date: 08/12/2024

FIR Submit Date: 08/13/2024

FIR Status: _____

Inspected Operator Information:

Company Name: HILCORP ENERGY COMPANY

Company Number: 10133

Address: P O BOX 61229

City: HOUSTON

State: TX

Zip: 77208

LOCATION - Location ID: 326093

Location Name: CARTER UTE-N32N10W

Number: 13NENE

County: _____

Qtrqtr: NENE

Sec: 13

Twp: 32N

Range: 10W

Meridian: N

Latitude: 37.020960

Longitude: -107.880178

FACILITY - API Number: 05-067-

-00

Facility ID: 326093

Facility Name: CARTER UTE-N32N10W

Number: 13NENE

Qtrqtr: NENE

Sec: 13

Twp: 32N

Range: 10W

Meridian: N

Latitude: 37.020960

Longitude: -107.880178

CORRECTIVE ACTIONS:

1 CA# 197709

Corrective Action: Install proper guy line markers per Rule 1003.a

Date: 08/27/2024

Response: CA COMPLETED

Date of Completion: 08/29/2024

Operator
Comment:

Rig anchor has been marked. See attached photo.

ECMC Decision: _____

ECMC
Representative:

2 CA# 197710

Corrective Action: Comply with rule 1002 Install or repair required BMPs.

Date: 08/20/2024

Response: CA COMPLETED

Date of Completion: 08/29/2024

Operator
Comment:

Erosion issues have been corrected. See attached photos.

ECMC Decision: _____

ECMC
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: Priscilla Shorty

Signed: _____

Title: OperationsRegulatory Tech

Date: 8/30/2024 10:59:34 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>
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403906606	Carter Ute 107_714001067 Resolved Photos
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Total Attach: 1 Files