

State of Colorado Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403942670

Date Received:
10/02/2024

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: 24500

Name of Operator: PADCO LLC

Address: 16508 ARMINTA STREET

City: VAN NUYS State: CA Zip: 91406

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>RICHMOND, DAN</u>		<u>dan@dsrinc.net</u>
<u>BROTHERTON, ANDREA</u>		<u>abrotherton@136elcamino.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 708200244

Inspection Date: 05/15/2023

FIR Submit Date: 05/18/2023

FIR Status: _____

Inspected Operator Information:

Company Name: PADCO LLC

Company Number: 24500

Address: 800 W 6TH STREET SUITE 1010

City: LOS ANGELES State: CA Zip: 90017

LOCATION - Location ID: 317233

Location Name: FASSLER-62N53W Number: 32NENE County: _____

Qtrqtr: NENE Sec: 32 Twp: 2N Range: 53W Meridian: 6

Latitude: 40.101665 Longitude: -103.324694

FACILITY - API Number: 05-121- -00 Facility ID: 317233

Facility Name: FASSLER-62N53W Number: 32NENE

Qtrqtr: NENE Sec: 32 Twp: 2N Range: 53W Meridian: 6

Latitude: 40.101665 Longitude: -103.324694

CORRECTIVE ACTIONS:

1 CA# 171140

Corrective Action: Install or repair wildlife protection equipment per Rule 902.b.

Date: 05/29/2023

Response: CA COMPLETED

Date of Completion: 05/29/2023

Operator Comment: Wildlife protection devices installed. Per Inspection on 6/3/2024, Document #711900812, inspection was "Satisfactory".

ECMC Decision: _____

ECMC
Representative:

2 CA# 171141

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

Date: 06/01/2023

Response: CA COMPLETED

Date of Completion: 06/01/2023

Operator Comment: Proper guy line markers have been installed. Per Inspection on 6/3/2024, Document #711900812, inspection was "Satisfactory".

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: Jessica Donahue

Signed: _____

Title: Compliance Specialist

Date: 10/2/2024 8:08:10 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