

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:
403901261

Date Received:
08/26/2024

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: 10503
Name of Operator: RED HAWK PETROLEUM LLC
Address: 575 N DAIRY ASHFORD STE 201
City: HOUSTON State: TX Zip: 77079

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Charles Hinojosa</u>		<u>chinojosa@pedevco.com</u>
<u>Erin Ekblad</u>		<u>eekblad@pedevco.com</u>
<u>Kelsi Welch</u>		<u>kelsi.welch@iptwell.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 696306639
Inspection Date: 08/09/2024 FIR Submit Date: 08/09/2024 FIR Status: _____

Inspected Operator Information:

Company Name: RED HAWK PETROLEUM LLC Company Number: 10503
Address: 575 N DAIRY ASHFORD STE 201
City: HOUSTON State: TX Zip: 77079

LOCATION - Location ID: 427041

Location Name: Buchner Number: 1-2H County: WELD
Qtrqr: Lot 1 Sec: 2 Twp: 7N Range: 60W Meridian: 6
Latitude: 40.610890 Longitude: -104.052294

FACILITY - API Number: 05-123-00 Facility ID: 427019

Facility Name: Buchner Number: 1-2H
Qtrqr: Lot 1 Sec: 2 Twp: 7N Range: 60W Meridian: 6
Latitude: 40.610890 Longitude: -104.052294

CORRECTIVE ACTIONS:

1 CA# 197619

Corrective Action: Without an approved Gas Capture Plan or Variance, the well is to be shut in and conserved.
Form 7 reporting needs to be corrected to include all produced gas volumes. If access to infrastructure (gas gathering) has been terminated an updated Form 10 is required.

Date: 08/19/2024

Response: CA COMPLETED Date of Completion: 08/19/2024

Operator Comment: The well has been shut in while operations and equipment are being evaluated and reviewed to ensure full compliance. All applicable forms and documentation will be provided and/or updated prior to returning the well to production.

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: Kelsi Welch

Signed: _____

Title: Permitting & Compliance

Date: 8/26/2024 5:56:03 PM

ATTACHMENT LIST

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

Document Number **Description**

403901261	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files