

State of Colorado  
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:  
403988871

Date Received:  
11/08/2024

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

1 of 2 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

Phone

Email

Luke Kelly

970-939-6353

lkelly@civiresources.com

### ECMC INSPECTION SUMMARY:

FIR Document Number: 713901127

Inspection Date: 10/23/2024

FIR Submit Date: 10/25/2024

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: 331898

Location Name: NEWMAN-62N64W Number: 32CNW County: \_\_\_\_\_

Qtrqtr: CNW Sec: 32 Twp: 2N Range: 64W Meridian: 6

Latitude: 40.098729 Longitude: -104.579643

#### FACILITY - API Number: 05-123- -00 Facility ID: 331898

Facility Name: NEWMAN-62N64W Number: 32CNW

Qtrqtr: CNW Sec: 32 Twp: 2N Range: 64W Meridian: 6

Latitude: 40.098729 Longitude: -104.579643

### CORRECTIVE ACTIONS:

1 CA# 200088

Corrective Action: Comply with Rule 1105.f.(2). Form 44 should have been submitted within 90-days of completing abandonment.

Date: 11/25/2024

Response: CA COMPLETED

Date of Completion: 11/01/2024

Operator Comment: Operator reported that records show the flowline was abandoned in place on 11/7/2014. The F42 was then submitted well after the fact to close out the Well's FM6SR. The Operator was also able to confirm that the entirety of the ~4000-ft line was abandoned in place on 11/7/2014, so the FM42 is related to the entire wellhead flowline.

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

ECMC Representative:	
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<u>OPERATOR COMMENT AND SUBMITTAL</u>	
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: 11/8/2024 4:47:52 PM

**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