

State of Colorado Energy & Carbon Management Commission



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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
<u>Luke Kelly</u>	<u>970-939-6353</u>	<u>lkelly@civiresources.com</u>

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:

OPERATOR COMMENT AND SUBMITTAL

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.

Document Number **Description**

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

Total Attach: 0 Files