

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401710384

Date Received:

07/23/2018

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10456

Name of Operator: CAERUS PICEANCE LLC

Address: 1001 17TH STREET #1600

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Lindsey Rider

970-285-2711

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689301329

Inspection Date: 06/18/2018

FIR Submit Date: 06/18/2018

FIR Status: _____

Inspected Operator Information:

Company Name: CAERUS PICEANCE LLC

Company Number: 10456

Address: 1001 17TH STREET #1600

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 335228

Location Name: BENZEL DISPOSAL-66S93W Number: 36NWNE County: GARFIELD

Qtrqr: NWNE Sec: 36 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.488550 Longitude: -107.721540

FACILITY - API Number: 05-045- -00 Facility ID: 262617

Facility Name: BENZEL Number: 36-2B (B36)

Qtrqr: NWNE Sec: 36 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.488550 Longitude: -107.721540

CORRECTIVE ACTIONS:

1 CA# 116831

Corrective Action: Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 07/18/2018

Response: CA COMPLETED

Date of Completion: 07/18/2018

Operator Comment: Repairs and cleanup have been completed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 116832

Corrective Action: Properly treat or dispose of oily waste in accordance with Rule 907.e.

Date: 07/18/2018

Response: CA COMPLETED

Date of Completion: 07/18/2018

Operator
Comment:

Containment was pressure washed.

COGCC Decision:

COGCC
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: Lindsey Rider

Signed:

Title: EHS Lead

Date: 7/23/2018 10:29:54 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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Total Attach: 0 Files