

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401905783

Date Received:
01/15/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 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
<u>Lindsey Rider</u>	<u>970-285-2711</u>	<u>cogcc.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 679701211

Inspection Date: 10/05/2018

FIR Submit Date: 10/21/2018

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: 316333

Location Name: FIGURE FOUR UNIT-64S98W Number: 9SESE County: RIO BLANCO

Qtrqr: SESE Sec: 9 Twp: 4S Range: 98W Meridian: 6

Latitude: 39.711782 Longitude: -108.390998

FACILITY - API Number: 05-103-00 Facility ID: 265940

Facility Name: FIGURE FOUR UNIT Number: 8016B P09
498

Qtrqr: SESE Sec: 9 Twp: 4S Range: 98W Meridian: 6

Latitude: 39.711782 Longitude: -108.390998

CORRECTIVE ACTIONS:

1 CA# 119742

Corrective Action: Repair or install berms or other secondary containment devices per Rule 605.a.(4).

Date: 11/23/2018

Response: CA COMPLETED

Date of Completion: 11/28/2018

Operator Comment: Liner Repaired.

COGCC Decision: _____

COGCC
Representative:

2 CA# 119743

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: 11/23/2018

Response: CA COMPLETED

Date of Completion: 11/28/2018

Operator
Comment: Removed.

COGCC Decision: _____

COGCC
Representative:

3 CA# 119744

Corrective Action: Comply with Rule 1003.a

Date: 11/09/2018

Response: CA COMPLETED

Date of Completion: 11/28/2018

Operator
Comment: Marker Replaced.

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: 1/15/2019 2:03:04 PM

ATTACHMENT LIST

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

Document Number **Description**

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

Total Attach: 0 Files