

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:  
401927928  
Date Received:  
02/04/2019

FIR RESOLUTION FORM

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 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: 689303120

Inspection Date: 01/30/2019

FIR Submit Date: 01/30/2019

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: 324196

Location Name: GMR-66S93W Number: 21SENE County: GARFIELD

Qtrqr: NWSE Sec: 21 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.508990 Longitude: -107.772300

FACILITY - API Number: 05-045-00 Facility ID: 264267

Facility Name: GMR Number: 21-10B(21)

Qtrqr: NWSE Sec: 21 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.508990 Longitude: -107.772300

CORRECTIVE ACTIONS:

1  CA# 122182

Corrective Action: 1) Comply with 603.f.  
2) Comply with 603.f., For unused, unmarked flowline risers 24 hrs to lock out tag out.  
30 days to remove riser

Date: 03/04/2019

Response: CA COMPLETED Date of Completion: 02/04/2019

Operator Comment: The riser has been marked. The pipe was removed from location.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Approval/passing of the FORM 4/FIRR, acknowledges that the Oil and Gas Conservation Commission has received the Notice.  
A field inspection will be conducted to evaluate compliance.

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: 2/4/2019 10:28:49 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>
401927928	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files