

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:

402180682

Date Received:

09/18/2019

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

Romana Cowden

970-285-2771

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689703519

Inspection Date: 09/10/2019

FIR Submit Date: 09/10/2019

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: 335839

Location Name: N.PARACHUTE-65S95W Number: 19NENW County: _____

Qtrqr: NENW Sec: 19 Twp: 5S Range: 95W Meridian: 6

Latitude: 39.604617 Longitude: -108.103427

FACILITY - API Number: 05-045- -00 Facility ID: 335839

Facility Name: N.PARACHUTE-65S95W Number: 19NENW

Qtrqr: NENW Sec: 19 Twp: 5S Range: 95W Meridian: 6

Latitude: 39.604617 Longitude: -108.103427

CORRECTIVE ACTIONS:

1 ☒ CA# 130382

Corrective Action: Lock Out/Tag Out unused flowline risers within 24 hours of receipt of this report. Comply with Rule 603.f.

Date: 10/11/2019

Response: CA COMPLETED

Date of Completion: 09/17/2019

Operator Comment: Unused 2" stands for housing were removed.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 ☒ CA# 130383

Corrective Action: Install sign to comply with Rule 210.b.

Date: 10/11/2019

Response: CA COMPLETED

Date of Completion: 09/17/2019

Operator
Comment: Sticker was added to sign.

COGCC Decision: Approved pending re-inspection

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: Romana Cowden

Signed:

Title: EHS

Date: 9/18/2019 10:48:42 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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402180682	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files