

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:

402418395

Date Received:

06/10/2020

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
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>cogcc.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700401124

Inspection Date: 04/20/2020

FIR Submit Date: 04/21/2020

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: 316505

Location Name: LIBERTY UNIT-63S96W Number: 24SWNW County: RIO BLANCO

Qtrqtr: SWN Sec: 24 Twp: 3S Range: 96W Meridian: 6
W

Latitude: 39.776959 Longitude: -108.124297

FACILITY - API Number: 05-103-00 Facility ID: 282956

Facility Name: ELU Number: 8905C-24
E24 39

Qtrqtr: SWN Sec: 24 Twp: 3S Range: 96W Meridian: 6
W

Latitude: 39.776959 Longitude: -108.124297

CORRECTIVE ACTIONS:

1 CA# 138188

Corrective Action: Install proper guy line markers per Rule 1003.a

Date: 06/20/2020

Response: CA COMPLETED

Date of Completion: 04/30/2020

Operator Comment: Marker was installed.

COGCC Decision: Approved pending re-inspection

COGCC Representative:

[Empty text box for COGCC Representative]

2 CA# 138189

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

Date: 06/20/2020

Response: CA COMPLETED

Date of Completion: 04/30/2020

Operator Comment:

Information was added.

[Empty text box for Operator Comment]

COGCC Decision: Approved pending re-inspection

COGCC Representative:

[Empty text box for COGCC Representative]

OPERATOR COMMENT AND SUBMITTAL

Comment:

[Empty text box for 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: 6/10/2020 2:31:55 PM

ATTACHMENT LIST

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

Document Number	Description
402418395	FIR RESOLUTION SUBMITTED
402418397	Information was added
402418398	Marker was installed

Total Attach: 3 Files