

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:  
402420969

Date Received:  
06/12/2020

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: 700401006

Inspection Date: 04/13/2020

FIR Submit Date: 04/14/2020

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: 335746

Location Name: BULL FORK UNIT-64S97W Number: 19NENE County: GARFIELD

Qtrqr: NENE Sec: 19 Twp: 4S Range: 97W Meridian: 6

Latitude: 39.692157 Longitude: -108.311880

FACILITY - API Number: 05-045-00 Facility ID: 211458

Facility Name: DOUBLE WILLOW Number: 8601D A19  
497

Qtrqr: NENE Sec: 19 Twp: 4S Range: 97W Meridian: 6

Latitude: 39.692157 Longitude: -108.311880

CORRECTIVE ACTIONS:

1  CA# 137966

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

Date: 06/13/2020

Response: CA COMPLETED

Date of Completion: 06/01/2020

Operator Comment: Anchors were marked.

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

2  CA# 137967

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

Date: 06/13/2020

Response: CA COMPLETED

Date of Completion: 06/13/2020

Operator  
Comment: Sign was installed.

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: 6/12/2020 1:46:45 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402420969	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files