

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:
402420999

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: 700400996

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: 324242

Location Name: FIGURE FOUR-64S98W Number: 25NESE County: GARFIELD

Qtrqr: NESE Sec: 25 Twp: 4S Range: 98W Meridian: 6

Latitude: 39.671042 Longitude: -108.333173

FACILITY - API Number: 05-045-00 Facility ID: 269387

Facility Name: FIGURE FOUR Number: 8009B I25 498

Qtrqr: NESE Sec: 25 Twp: 4S Range: 98W Meridian: 6

Latitude: 39.671042 Longitude: -108.333173

CORRECTIVE ACTIONS:

1 CA# 137963

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

Date: 06/13/2020

Response: CA COMPLETED

Date of Completion: 06/12/2020

Operator Comment: Sign was installed.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 CA# 137964

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

Date: 06/13/2020

Response: CA COMPLETED

Date of Completion: 06/12/2020

Operator
Comment: Anchors were marked.

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 2:01:24 PM

ATTACHMENT LIST

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

Document Number **Description**

| | |
|-----------|--------------------------|
| 402420999 | FIR RESOLUTION SUBMITTED |
|-----------|--------------------------|

Total Attach: 1 Files