

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
402477797

Date Received:
08/28/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 5 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

720-951-5895

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 696201631

Inspection Date: 08/10/2020

FIR Submit Date: 08/11/2020

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: 335667

Location Name: N PARACHUTE Number: WF15A-23 County: _____
F23596

Qtrqtr: SENW Sec: 23 Twp: 5S Range: 96W Meridian: 6

Latitude: 39.601606 Longitude: -108.140351

FACILITY - API Number: 05-045- -00 Facility ID: 335667

Facility Name: N PARACHUTE Number: WF15A-23
F23596

Qtrqtr: SENW Sec: 23 Twp: 5S Range: 96W Meridian: 6

Latitude: 39.601606 Longitude: -108.140351

CORRECTIVE ACTIONS:

4 CA# 141158

Corrective Action: Implement BMPs to mitigate transport/discharge of impacted materials pursuant to 1002.f rules.

Date: 07/30/2020

Response: CA COMPLETED

Date of Completion: 08/15/2020

Operator Comment: BMPs were added.

COGCC Decision: _____

COGCC
Representative:

5 CA# 141159

Corrective Action: Install or repair required BMPs per Rule 1002.f. Continue stormwater managment and implement BMPs as needed to adapt to the site conditions.

Date: 07/14/2020

Response: CA COMPLETED

Date of Completion: 08/15/2020

Operator
Comment: BMPs were added.

COGCC Decision: _____

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: 8/28/2020 2:53:44 PM

ATTACHMENT LIST

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

Document Number **Description**

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Total Attach: 0 Files