

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:
402408023

Date Received:
05/28/2020

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: 692402126

Inspection Date: 04/23/2020

FIR Submit Date: 05/04/2020

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: 334911

Location Name: HMU-67S93W Number: 3NESE County: _____

Qtrqr: NESE Sec: 3 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.474020 Longitude: -107.755770

FACILITY - API Number: 05-045- -00 Facility ID: 334911

Facility Name: HMU-67S93W Number: 3NESE

Qtrqr: NESE Sec: 3 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.474020 Longitude: -107.755770

CORRECTIVE ACTIONS:

1 CA# 138607

Corrective Action: Mark or remove.

Date: 05/20/2020

Response: CA COMPLETED

Date of Completion: 05/19/2020

Operator Comment: Anchors were removed.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 CA# 138608

Corrective Action: Install or repair sufficient/effective BMPs in accordance with, and monitoring per Good Engineering Practices per Rule 1002.f

Date: 06/04/2020

Response: CA COMPLETED

Date of Completion: 05/19/2020

Operator
Comment:

BMPs were 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: 5/28/2020 2:27:21 PM

ATTACHMENT LIST

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

Document Number **Description**

402408023	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files