

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
402612434

Date Received:
03/01/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 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: 696201488

Inspection Date: 07/08/2020

FIR Submit Date: 07/13/2020

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: 312455

Location Name: BEVAN-610S96W Number: 29SWNW County: _____

Qtrqr: SWN Sec: 29 Twp: 10S Range: 96W Meridian: 6
W

Latitude: 39.161220 Longitude: -108.134480

FACILITY - API Number: 05-077-00 Facility ID: 312455

Facility Name: BEVAN-610S96W Number: 29SWNW

Qtrqr: SWN Sec: 29 Twp: 10S Range: 96W Meridian: 6
W

Latitude: 39.161220 Longitude: -108.134480

CORRECTIVE ACTIONS:

1 CA# 140412

Corrective Action: Comply with 1004 rules. This inspection has 2 corrective actions and dates.

Date: 07/28/2020

- 1) Conduct weed management pursuant to Rule 1004.e by 7/28/2020
- 2) Conduct additional reclamation to facilitate desirable vegetative establishment of the Location. The optimum seeding window for spring 2020 has passed. To allow Operator a more favorable seeding window outside of summer conditions, a CA date of 11/1/2020 is being provided.

Response: CA COMPLETED

Date of Completion: 03/01/2021

Operator
Comment:

Weeds were treated 7/14/2020. Variance was signed and will be submitted.

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: 3/1/2021 6:34:32 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files