

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:
402856363

Date Received:
10/28/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 4 CAs from the FIR responded to on this Form

3 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: 700703356

Inspection Date: 10/12/2021

FIR Submit Date: 10/12/2021

FIR Status: _____

Inspected Operator Information:

Company Name: XTO ENERGY INC

Company Number: 100264

Address: 110 W 7TH STREET

City: FORT WORTH State: TX Zip: 76102

LOCATION - Location ID: 335962

Location Name: PICEANCE CREEK UNIT-61S97W Number: 36NESW County: _____

Qtrqtr: NESW Sec: 36 Twp: 1S Range: 97W Meridian: 6

Latitude: 39.918683 Longitude: -108.228997

FACILITY - API Number: 05-103-00 Facility ID: 335962

Facility Name: PICEANCE CREEK UNIT-61S97W Number: 36NESW

Qtrqtr: NESW Sec: 36 Twp: 1S Range: 97W Meridian: 6

Latitude: 39.918683 Longitude: -108.228997

CORRECTIVE ACTIONS:

1 CA# 156711

Corrective Action: Repair or install berms or other secondary containment devices

Date: 11/12/2021

Response: CA COMPLETED

Date of Completion: 10/21/2021

Operator Comment: Secondary containment was repaired.

COGCC Decision: _____

COGCC
Representative:

2 CA# 156712

Corrective Action: Install proper labeling

Date: 10/22/2021

Response: CA COMPLETED

Date of Completion: 10/28/2021

Operator
Comment: Sign was installed.

COGCC Decision: _____

COGCC
Representative:

3 CA# 156713

Corrective Action: Remove debris

Date: 10/22/2021

Response: CA COMPLETED

Date of Completion: 10/21/2021

Operator
Comment: All debris were removed.

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: 10/28/2021 1:58:23 PM

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