

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:
403050065

Date Received:
05/16/2022

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 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

Romana Cowden

720-951-5895

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 700704066

Inspection Date: 04/06/2022

FIR Submit Date: 04/07/2022

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: 334798

Location Name: COUEY-67S92W Number: 8NESW County: _____

Qtrqr: NESW Sec: 8 Twp: 7S Range: 92W Meridian: 6

Latitude: 39.458810 Longitude: -107.691490

FACILITY - API Number: 05-045- -00 Facility ID: 334798

Facility Name: COUEY-67S92W Number: 8NESW

Qtrqr: NESW Sec: 8 Twp: 7S Range: 92W Meridian: 6

Latitude: 39.458810 Longitude: -107.691490

CORRECTIVE ACTIONS:

1 CA# 160813

Corrective Action: Repair or install proper protection for wild life

Date: 05/06/2022

Response: CA COMPLETED

Date of Completion: 04/20/2022

Operator
Comment:

Repaired.

COGCC Decision: _____

COGCC
Representative:

2 CA# 160814

Corrective Action: Install cap/plug

Date: 05/13/2022

Response: CA COMPLETED

Date of Completion: 04/20/2022

Operator
Comment: Plugged loadline valve

COGCC Decision:

COGCC
Representative:

3 CA# 160815

Corrective Action: Install or repair required BMPs

Date: 05/20/2022

Response: CA COMPLETED

Date of Completion: 04/20/2022

Operator
Comment: graded access road and pad surface.

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: 5/16/2022 10:55:09 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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Total Attach: 0 Files