

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:

403101566

Date Received:

07/11/2022

FIR RESOLUTION FORM

Overall Status:

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: 699700317

Inspection Date: 06/16/2022

FIR Submit Date: 07/07/2022

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: _____

Location Name: _____ Number: _____ County: _____

Qtrqr: NENE Sec: 29 Twp: 8S Range: 96W Meridian: 6

Latitude: 39.324127 Longitude: -108.123307

FACILITY - API Number: 05-077-00 Facility ID: 482381

Facility Name: H29OU Valve Can Release Number: _____

Qtrqr: NENE Sec: 29 Twp: 8S Range: 96W Meridian: 6

Latitude: 39.324127 Longitude: -108.123307

CORRECTIVE ACTIONS:

1 CA# 163140

Corrective Action: Operator shall comply with Rule 913.b.(2) and conduct sampling and analysis of soil and Groundwater (if encountered or a pathway to groundwater is determined) pursuant to Rule 915 to determine the horizontal and vertical extent of any contamination in excess of the cleanup concentrations in Table 915-1 or in WQCC Regulation 41 numeric and narrative Groundwater quality standards and classifications, as incorporated by reference in Rule 901.b.

Date: _____

Response: CA COMPLETED

Date of Completion: 06/15/2022

Samples were taken

Operator
Comment:

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: 7/11/2022 3:03:43 PM

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