

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:
403143102

Date Received:
08/22/2022

FIR RESOLUTION FORM

Overall Status:

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

Romana Cowden

720-951-5895

COGCC.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702800410

Inspection Date: 07/01/2022

FIR Submit Date: 07/06/2022

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: 335228

Location Name: BENZEL DISPOSAL-66S93W Number: 36NWNE County: _____

Qtrqr: NWNE Sec: 36 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.488510 Longitude: -107.721330

FACILITY - API Number: 05-045-00 Facility ID: 335228

Facility Name: BENZEL DISPOSAL-66S93W Number: 36NWNE

Qtrqr: NWNE Sec: 36 Twp: 6S Range: 93W Meridian: 6

Latitude: 39.488510 Longitude: -107.721330

CORRECTIVE ACTIONS:

1 CA# 163116

Corrective Action: Conduct weed management to prevent further establishment and spread of noxious weeds. Ongoing weed management is required until location passes final reclamation.

Date: 07/13/2022

Response: CA COMPLETED

Date of Completion: 07/11/2022

Operator
Comment:

Weeds were treated.

COGCC Decision: _____

COGCC Representative:			
2	CA# 163117		
Corrective Action:	Install or repair required BMPs.	Date: <u>07/15/2022</u>	
Response:	CA COMPLETED	Date of Completion: <u>07/26/2022</u>	
Operator Comment:	Graded pad surface and access road. Also installed additional gravel.		
COGCC Decision:			
COGCC Representative:			

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	
<p>I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.</p> <p>Print Name: <u>Romana Cowden</u> Signed: _____</p> <p>Title: <u>EHS</u> Date: <u>8/22/2022 12:12:53 PM</u></p>	

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>

Total Attach: 0 Files