

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:  
403240137

Date Received:  
11/28/2022

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
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>COGCC.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 702800300

Inspection Date: 05/31/2022

FIR Submit Date: 06/07/2022

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: 335228

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

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

Latitude: 39.488590 Longitude: -107.721640

FACILITY - API Number: 05-045- -00 Facility ID: 210297

Facility Name: BENZEL DISPOSAL Number: 1

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

Latitude: 39.488590 Longitude: -107.721640

CORRECTIVE ACTIONS:

1  CA# 162511

Corrective Action: Submit Field Inspection Report Resolution (FIRR) detailing purpose of pipe equipment and remove if associated with well #045-06053.

Date: 07/07/2022

Response: CA COMPLETED

Date of Completion: 11/28/2022

Operator Comment: This is an active automation line. All automation lines run through the box near the P&A'd well, but they are running the other 4 wells on location.

COGCC Decision: Approved

COGCC  
Representative:

Corrective action has been addressed with FIRR. See also inspection #702801007.

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: 11/28/2022 9:10:43 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403240137	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files