

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:

403326590

Date Received:

02/21/2023

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: 702801267

Inspection Date: 02/13/2023

FIR Submit Date: 02/16/2023

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: 334610

Location Name: BASS-67S93W Number: 14SWNE County: _____

Qtrqr: SWNE Sec: 14 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.446130 Longitude: -107.741310

FACILITY - API Number: 05-045-00 Facility ID: 334610

Facility Name: BASS-67S93W Number: 14SWNE

Qtrqr: SWNE Sec: 14 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.446130 Longitude: -107.741310

CORRECTIVE ACTIONS:

1 CA# 167596

Corrective Action: Clean up and properly dispose of stained material.

Date: 03/03/2023

Response: CA COMPLETED

Date of Completion: 02/21/2023

Operator
Comment: Cleaned.

COGCC Decision: _____

COGCC
Representative:

2 CA# 167597

Corrective Action: Install or repair wildlife protection equipment.

Date: 02/21/2023

Response: CA COMPLETED

Date of Completion: 02/21/2023

Operator
Comment: Sealed.

COGCC Decision:

COGCC
Representative:

3 CA# 167598

Corrective Action: Install bull plug on tank drain.

Date: 02/26/2023

Response: CA COMPLETED

Date of Completion: 02/21/2023

Operator
Comment: Bull plug was installed.

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: 2/21/2023 3:53:31 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