

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:

403362328

Date Received:

03/31/2023

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: 702801346

Inspection Date: 03/14/2023

FIR Submit Date: 03/15/2023

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: 334944

Location Name: BENZEL-66S93W Number: 36SESW County: _____

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

Latitude: 39.477930 Longitude: -107.726950

FACILITY - API Number: 05-045-00 Facility ID: 334944

Facility Name: BENZEL-66S93W Number: 36SESW

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

Latitude: 39.477930 Longitude: -107.726950

CORRECTIVE ACTIONS:

1 CA# 168162

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes. Additionally, provide information in an FIRR on the cause/details of the staining.

Date: 02/11/2023

Response: CA COMPLETED

Date of Completion: 02/21/2023

Operator Comment: Stains were removed.

COGCC Decision: _____

COGCC Representative:			
2	CA# 168163		
Corrective Action:	Install or repair wildlife protection equipment.		Date: <u>03/20/2023</u>
Response:	CA COMPLETED	Date of Completion: <u>03/20/2023</u>	
Operator Comment:	BMP was added.		
COGCC Decision:			
COGCC Representative:			

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: <u>Romana Cowden</u>	Signed: _____
Title: <u>EHS</u>	Date: <u>3/31/2023 3:36:36 PM</u>

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