

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:

403385646

Date Received:

04/26/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

0 CA Completed

1 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: 708300334

Inspection Date: 04/24/2023

FIR Submit Date: 04/24/2023

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: 335393

Location Name: PUCKETT-66S96W Number: 31NWNE County: _____

Qtrqr: NWNE Sec: 31 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.483720 Longitude: -108.145890

FACILITY - API Number: 05-045- -00 Facility ID: 335393

Facility Name: PUCKETT-66S96W Number: 31NWNE

Qtrqr: NWNE Sec: 31 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.483720 Longitude: -108.145890

CORRECTIVE ACTIONS:

1 CA# 170029

Corrective Action: Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to comply with Rule 1002

Date: 05/09/2023

Response: FACTUAL REVIEW REQUEST

Basis for Review: Action requested was already completed prior to the inspection

Operator Comment: This location was recently bladed, and there is existing road base present in the road. Erosion documented is very minimal and matches surrounding conditions. Caerus believes we have minimized off-site sediment transport per the rules.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment:

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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: 4/26/2023 2:50:48 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