

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:
403378545

Date Received:
04/20/2023

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 4 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>(970) 285-2600</u> | <u>COGCC.inspections@caerusoilandgas.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 702501013

Inspection Date: 03/20/2023

FIR Submit Date: 03/20/2023

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: 436810

Location Name: Island Ranch Number: 13-796 County: _____

Qtrqr: Lot 11 Sec: 13 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.433800 Longitude: -108.064242

FACILITY - API Number: 05-045-00 Facility ID: 436810

Facility Name: Island Ranch Number: 13-796

Qtrqr: Lot 11 Sec: 13 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.433800 Longitude: -108.064242

CORRECTIVE ACTIONS:

1 CA# 168331

Corrective Action: All Tanks with a capacity of 10 Barrels or greater will be labeled or posted with the following information: Name of Operator; Operator's emergency contact telephone number; Tank capacity; Tank contents; and NFPA label or equivalent globally harmonized label.

Date: 04/24/2023

Response: CA COMPLETED

Date of Completion: 04/19/2023

Operator Comment: Replaced, see photo.

COGCC Decision: Approved pending re-inspection

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: 4/20/2023 7:22:30 AM

ATTACHMENT LIST

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

| Document Number | Description |
|------------------------|--------------------------|
| 403378545 | FIR RESOLUTION SUBMITTED |
| 403378552 | Signs were replaced. |

Total Attach: 2 Files