

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:

403422321

Date Received:

06/05/2023

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 3 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 |
|---------------|--------------|---------------------------------------|
| Romana Cowden | 720-951-5895 | COGCC.inspections@caerusoilandgas.com |

COGCC INSPECTION SUMMARY:

FIR Document Number: 698100284

Inspection Date: 03/07/2023

FIR Submit Date: 03/10/2023

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: 316655

Location Name: YELLOW CREEK FEDERAL-61S98W Number: 1LOT 5 County: _____

Qtrqtr: Lot 5 Sec: 1 Twp: 1S Range: 98W Meridian: 6

Latitude: 40.002920 Longitude: -108.337400

FACILITY - API Number: 05-103-00 Facility ID: 316655

Facility Name: YELLOW CREEK FEDERAL-61S98W Number: 1LOT 5

Qtrqtr: Lot 5 Sec: 1 Twp: 1S Range: 98W Meridian: 6

Latitude: 40.002920 Longitude: -108.337400

CORRECTIVE ACTIONS:

1 CA# 168041

Corrective Action: Conduct routine inspections of filter pot secondary containment and surrounding areas outside of containment for spills. Provide documentation of spill evaluation and any steps taken to prevent Spills or Releases due to similar causes to the future on an FIRR form.

Date: 04/07/2023

Response: CA COMPLETED

Date of Completion: 05/22/2023

Operator Comment: Repairs completed w/ overhaul of tanks and tank battery containment

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: 6/5/2023 6:05:31 AM

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