

FORM

12

Rev
02/20

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



FOR OGCC USE ONLY

Document Number:

403390357

Receive Date:

05/01/2023

GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

Purpose of Form: (Select one)

New Registration

Annual Report of Changes

Change of Operator

Name of Operator: CAERUS PICEANCE LLC

OGCC Operator Number: 10456 Suff: _____

One Call Participation (One box must be checked.)

In checking this box, the Submitting Operator hereby confirms Tier One membership in the Utility Notification Center of Colorado (CO 811) and participation in Colorado's One Call notification system. [Rule 1102.n.]

In checking this box, the Operator hereby certifies it has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n. (2)]

Address: 1001 17TH STREET #1600

City: DENVER State: CO Zip: 80202

Contact Name: Kristine Mize-Spansky
First Name Last Name

Phone: 720 8806368 Email: kmizespansky@caerusoilandgas.com

NON-Submitting Operator Information:

COGCC Number of Non-Submitting : _____ Name of Non-Submitting: _____

Non-Submitting Operator is : _____ Contact Name : _____

Title: _____ Non-Submitting Operator Contact Email: _____

FACILITY INFORMATION

Facility Name and Number: Mamm Creek Gas System COGCC Facility ID: 475314

**A separate Form 12 must be submitted for each facility or each component of a gathering system.
Select the type of facility below.**

TYPE OF FACILITY (Select one)

Gas Compressor Station	<input type="checkbox"/>	Gas Processing Plant	<input type="checkbox"/>
Gas Gathering Pipeline System	<input checked="" type="checkbox"/>	Underground Gas Storage	<input type="checkbox"/>

Estimated Daily Processing Total: 1.10 MMSCFPD

Gas Compressor Station – Number of Compressors: _____

Financial Assurance: Gas Facility Surety ID# 20230016

Surface Ownership: Fee State Federal Indian

Facility Location

- Provide a legal location and the latitude and longitude of that location.
- Provide the GPS data for the latitude and longitude of the legal location.
- When one exists, provide the street address of the facility.
- For a Gas Gathering Pipeline System or an Underground Gas Storage Facility use sections, townships, ranges and counties to describe the geographic area covered by the system or facility.

Legal Location: QTRQTR SWNE Sec 1 Twp 8S Rng 92W Meridian 6

County GARFIELD

Latitude 39.390874 Longitude -107.615039

GPS Data (if available): PDOP Reading _____

Date of Measurement _____ GPS Instrument Operator's Name _____

Facility Address (if exists) _____

City _____ State CO Zip _____

Gas Gathering Pipeline System or Underground Gas Storage Facility - Description of Geographic Area:

Legal Description: Mamm Creek Gas System Garfield County: T6S R92W, Sec. 29, 30 T6S R93W, Sec. 18 T6S R94W, Sec. 12, 13 T7S R92W, Sec. 22, 26, 27, 28, 31, 34, 35 T7S R93W, Sec. 10 T8S R91W, Sec. 6, 7, 15, 16, 17, 18, 19, 20, 22, 23, 25, 26, 27, 30, 36 T8S R92W, Sec. 1, 2, 3, 6, 9, 10, 11 T8S R93W, Sec. 1, 2, 11, 12
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Related Gas Gathering Pipeline System

For a Gas Processing Plant or a Gas Compressor Station that is part of a Gas Gathering Pipeline System:

If the Gas Gathering Pipeline System is registered, enter the Facility ID of that system: _____

If the Gas Gathering Pipeline System is NOT registered, enter the Form 12 Document Number submitted to register that system: _____

CHANGE OF OPERATOR

Effective Date of Change: _____ Form is being submitted by: _____

The Buying Operator is a Tier One membership in the Utility Notification Center of Colorado (CO 811) and participates in Colorado's One Call notification system. [Rule 1102.n.]

The Buying Operator has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n.(2)]

Name of Buying Operator:	Name of Selling Operator:
Buying Operator COGCC Number:	Selling Operator COGCC Number:
Print Name:	Print Name:
Signature:	Signature:
Title:	Title:
Date:	Date:

Operator Comments:

Quarterly updates due to database cleanup and field updates by line locators.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

SUMMITTED BY:

Signed: _____ Print Name: Kristine Mize-Spansky

Title: Integrity Management/GIS Email: kmizespansky@caerusoilandgas.com Date: 5/1/2023

COGCC Approved: Ellice Whittington Date: 6/27/2023

FACILITY ID: 475314

Condition of Approval

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Financial Assurance	Per Rule 703.d.(2).A-B, the Operator must provide blanket Financial Assurance in the amount of \$100,000 for Operator's Gas Facilities gathering or processing more than 5 million standard cubic feet per day ("MMSCFD"). Operators of small systems gathering or processing less than 5 MMSCFD may provide individual Financial Assurance in the amount of \$5,000. Based on the current bonding amount, additional financial assurance is required, and must be provided by December 1, 2023.	06/27/2023

Total: 1 comment(s)

Signature: _____

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403390357	Form 12 SUBMITTED
403390374	GAS GATHERING SYSTEM GIS SHP

Total Attach: 2 Files