

State of Colorado
Energy & Carbon Management Commission



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Document Number:
403651070

Date Received:
01/11/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 2 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: 696205330
Inspection Date: 10/09/2023 FIR Submit Date: 10/11/2023 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: 335886

Location Name: Berry Number: 111 697 County:
Qtrqtr: NESE Sec: 11 Twp: 6S Range: 97W Meridian: 6
Latitude: 39.534660 Longitude: -108.180740

FACILITY - API Number: 05-045-00 Facility ID: 335886

Facility Name: Berry Number: 111 697
Qtrqtr: NESE Sec: 11 Twp: 6S Range: 97W Meridian: 6
Latitude: 39.534660 Longitude: -108.180740

CORRECTIVE ACTIONS:

2 CA# 183796

Corrective Action: Comply with Rule 1002.f- install and/or repair stormwater and erosion control measures in accordance with good engineering practices. Date: 10/09/2023

Response: CA COMPLETED Date of Completion: 11/10/2023

Operator Comment: This location was cross ripped to address seeding, and mulch, and erosion. Erosion logs on the lower perimeter of the location (fill slope) are in place. Rule 1002.f.(2) qualifies stormwater management with: "BMPs shall be selected based on site-specific conditions, such as slope, vegetation cover, and proximity to water bodies." A Runon control on top of location is functioning and adequate (ditch). Therefore, Caerus does not feel that erosion logs on the upper perimeter (cut slope) are reasonable or necessary on this specific location. See attached photos.

COGCC Decision: _____

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: 1/11/2024 7:49:32 AM

ATTACHMENT LIST

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

Document Number	Description
403651071	Cross Ripped and Seeded
403651072	Cross Ripped and Seeded

Total Attach: 2 Files