

State of Colorado Energy & Carbon Management Commission



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

Document Number:
403660198

Date Received:
01/19/2024

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
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>COGCC.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 702502263
Inspection Date: 01/03/2024 FIR Submit Date: 01/03/2024 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: 316338

Location Name: LITTLE HILLS FEDERAL-61N97W Number: 35NWNE County: RIO BLANCO
Qtrqr: NWNE Sec: 35 Twp: 1N Range: 97W Meridian: 6
Latitude: 40.015760 Longitude: -108.244800

FACILITY - API Number: 05-103-00 Facility ID: 267008

Facility Name: LITTLE HILLS FEDERAL Number: F31X-35G
Qtrqr: NWNE Sec: 35 Twp: 1N Range: 97W Meridian: 6
Latitude: 40.015760 Longitude: -108.244800

CORRECTIVE ACTIONS:

3 CA# 189782

Corrective Action: Install sign at locked entrance gate.
The Location Entrance sign will identify: The Well name; The Commission's Location identification number (ID #); The Operator's telephone number where it may be reached at all times; and the Telephone number(s) for local emergency services (911 where available).

Date: 02/03/2024

Response: CA COMPLETED Date of Completion: 01/03/2024

Operator Comment: No rule cited; Rule 605 does not require a sign at the gate.

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: 1/19/2024 8:44:58 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>
------------------------	--------------------

--	--

Total Attach: 0 Files