

State of Colorado  
Energy & Carbon Management Commission



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Document Number:

403671161

Date Received:

01/30/2024

## FIR RESOLUTION FORM

**Overall Status:**

CA Summary:

2 of 4 CAs from the FIR responded to on this Form

2 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

Romana Cowden

Phone

720-951-5895

Email

COGCC.inspections@caerusoilandgas.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 708902473

Inspection Date: 12/07/2023

FIR Submit Date: 12/10/2023

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: 334384

Location Name: BATTLEMENT MESA-67S95W Number: 34SENV County: \_\_\_\_\_

Qtrqtr: SENW Sec: 34 Twp: 7S Range: 95W Meridian: 6

Latitude: 39.396611 Longitude: -107.984744

### FACILITY - API Number: 05-045-00 Facility ID: 334384

Facility Name: BATTLEMENT MESA-67S95W Number: 34SENV

Qtrqtr: SENW Sec: 34 Twp: 7S Range: 95W Meridian: 6

Latitude: 39.396611 Longitude: -107.984744

### CORRECTIVE ACTIONS:

2 CA# 189112

Corrective Action: All Tanks with a capacity of 10 Barrels or greater will be labeled or posted with the following information:

Date: 01/10/2024

- A. Name of Operator;
- B. Operator's emergency contact telephone number;
- C. Tank capacity;
- D. Tank contents; and
- E. NFPA label or equivalent globally harmonized label.

Response: CA COMPLETED

Date of Completion: 12/14/2024

Replaced.

Operator Comment:			
COGCC Decision: _____			
COGCC Representative:			
<b>3</b> CA# 189113			
Corrective Action:	Operators will prevent & minimize adverse impacts to wildlife resources.		Date: <u>12/18/2023</u>
Response:	CA COMPLETED		Date of Completion: <u>12/14/2023</u>
Operator Comment:	Capped.		
COGCC Decision: _____			
COGCC Representative:			

<b><u>OPERATOR COMMENT AND SUBMITTAL</u></b>	
Comment:	
<p>I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.</p> <p>Print Name: <u>Romana Cowden</u>                      Signed: _____</p> <p>Title: <u>EHS</u>    Date: <u>1/30/2024 1:17:48 PM</u></p>	

### 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