

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:

403754334

Date Received:

04/15/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC 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

ECMC INSPECTION SUMMARY:

FIR Document Number: 708301395

Inspection Date: 12/12/2023

FIR Submit Date: 12/15/2023

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: 334080

Location Name: S.PARACHUTE TBI-67S96W Number: 36NESE County: _____

Qtrqtr: NESE Sec: 36 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.392280 Longitude: -108.049890

FACILITY - API Number: 05-045- -00 Facility ID: 334080

Facility Name: S.PARACHUTE TBI-67S96W Number: 36NESE

Qtrqtr: NESE Sec: 36 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.392280 Longitude: -108.049890

CORRECTIVE ACTIONS:

1 ☒ CA# 189251

Corrective Action: Secure load lines to comply with Rule 608.e.

Date: 12/20/2023

Response: CA COMPLETED

Date of Completion: 12/20/2023

Operator
Comment: Cleaned.

ECMC Decision: Approved pending re-inspection

ECMC Representative:			
2	✔	CA# 189252	
Corrective Action:	Remove load hose from location to comply with Rule 606.		Date: <u>12/22/2023</u>
Response:	CA COMPLETED		Date of Completion: <u>12/20/2023</u>
Operator Comment:	Removed.		
ECMC Decision:	Approved pending re-inspection		
ECMC Representative:			

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
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>4/15/2024 12:55:57 PM</u></p>	

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403754334	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files