

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:
403761364

Date Received:
04/19/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 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	Phone	Email
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>COGCC.inspections@caerusoilandgas.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 708301904
Inspection Date: 03/26/2024 FIR Submit Date: 03/29/2024 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: 335297

Location Name: PUCKETT-66S96W Number: 31SEnw County: _____
Qtrqtr: SEnw Sec: 31 Twp: 6S Range: 96W Meridian: 6
Latitude: 39.481390 Longitude: -108.151330

FACILITY - API Number: 05-045-00 Facility ID: 335297

Facility Name: PUCKETT-66S96W Number: 31SEnw
Qtrqtr: SEnw Sec: 31 Twp: 6S Range: 96W Meridian: 6
Latitude: 39.481390 Longitude: -108.151330

CORRECTIVE ACTIONS:

1 CA# 193756

Corrective Action: Secure load line to comply with Rule 608.e. Date: 04/03/2024

Response: CA COMPLETED Date of Completion: 04/02/2024

Operator Comment: Plug was added, see photo.

ECMC Decision: Approved pending re-inspection

ECMC
Representative:

2 CA# 193757

Corrective Action: Remove stored equipment/debris from location to comply with Rule 606.

Date: 04/28/2024

Response: CA COMPLETED

Date of Completion: 04/08/2024

Operator
Comment: Equipment was removed, see photo.

ECMC Decision: Approved pending re-inspection

ECMC
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: 4/19/2024 9:41:08 AM

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>
403761364	FIR RESOLUTION SUBMITTED
403761377	Equipment was removed
403761379	Cap was added

Total Attach: 3 Files