

State of Colorado
Energy & Carbon Management Commission



Document Number:
403789554

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

Date Received:
05/14/2024

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

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 |
|---------------|--------------|---------------------------------------|
| Romana Cowden | 720-951-5895 | COGCC.inspections@caerusoilandgas.com |

ECMC INSPECTION SUMMARY:

FIR Document Number: 696205784
Inspection Date: 04/29/2024 FIR Submit Date: 05/01/2024 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: 334558

Location Name: ROLES-67S93W Number: 13NESE County:
Qtrqtr: NWSE Sec: 13 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.444210 Longitude: -107.721290

FACILITY - API Number: 05-045-00 Facility ID: 334558

Facility Name: ROLES-67S93W Number: 13NESE
Qtrqtr: NWSE Sec: 13 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.444210 Longitude: -107.721290

CORRECTIVE ACTIONS:

1 CA# 194818

Corrective Action: Comply with 603.o. Install or repair secondary containment measures at the tank battery facility. Date: 06/01/2024

Response: CA COMPLETED Date of Completion: 05/08/2024

Operator Comment: Liner was repaired, see photo.

ECMC Decision:

ECMC
Representative:

2 CA# 194819

Corrective Action: Comply with 1003.a. If anchors are no longer necessary on the Location, anchor should be removed pursuant to 606 requirements.

Date: 06/01/2024

Response: CA COMPLETED

Date of Completion: 05/08/2024

Operator
Comment: Removed.

ECMC Decision:

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: 5/14/2024 10:26:21 AM

ATTACHMENT LIST

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

Document Number **Description**

| | |
|-----------|--------------------|
| 403789572 | Liner was repaired |
|-----------|--------------------|

Total Attach: 1 Files