

State of Colorado Energy & Carbon Management Commission



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Document Number:
403804109

Date Received:
05/28/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 5 CAs from the FIR responded to on this Form

1 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>CAERUS</u>		<u>COGCC.inspections@caerusoilandgas.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 708302114
Inspection Date: 04/25/2024 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: 335512

Location Name: Mesa Number: C23-697 County: GARFIELD
Qtrqtr: NWNE Sec: 23 Twp: 6S Range: 97W Meridian: 6
Latitude: 39.515067 Longitude: -108.184547

FACILITY - API Number: 05-045-00 Facility ID: 293057

Facility Name: Puckett Number: 31A-23
Qtrqtr: NWNE Sec: 23 Twp: 6S Range: 97W Meridian: 6
Latitude: 39.515067 Longitude: -108.184547

CORRECTIVE ACTIONS:

5 CA# 194814

Corrective Action: 1002.f.(2): Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to control Stormwater runoff in a manner that minimizes erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved pursuant to Rule 1004.

Date: 05/16/2024

Response: CA COMPLETED Date of Completion: 05/24/2024

Operator Comment: Compaction and grade issues of locations surface addressed. Repaired surface locations lack of stabilization to minimize transportation of sediment, erosion, and site degradation.

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: Joey Gracey

Signed: _____

Title: Compliance

Date: 5/28/2024 8:02:57 AM

ATTACHMENT LIST

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

Document Number **Description**

403804118	Location Compaction
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Total Attach: 1 Files