

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:
403855422

Date Received:
07/16/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 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>Romana Cowden</u> | <u>720-951-5895</u> | <u>COGCC.inspections@caerusoilandgas.com</u> |

ECMC INSPECTION SUMMARY:

FIR Document Number: 708902518
Inspection Date: 12/11/2023 FIR Submit Date: 12/14/2023 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: 334638

Location Name: SAVAGE-67S94W Number: 1NESW County: _____
Qtrqtr: NESW Sec: 1 Twp: 7S Range: 94W Meridian: 6
Latitude: 39.465250 Longitude: -107.836100

FACILITY - API Number: 05-045-00 Facility ID: 334638

Facility Name: SAVAGE-67S94W Number: 1NESW
Qtrqtr: NESW Sec: 1 Twp: 7S Range: 94W Meridian: 6
Latitude: 39.465250 Longitude: -107.836100

CORRECTIVE ACTIONS:

1 CA# 189240

Corrective Action: 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.

Date: 12/29/2023

Response: CA COMPLETED Date of Completion: 06/29/2024

Operator Comment: Controls were maintained.

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: 7/16/2024 6:25:04 AM

ATTACHMENT LIST

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

| Document Number | Description |
|------------------------|--------------------------|
| 403855422 | FIR RESOLUTION SUBMITTED |
| 403855424 | Controls maintained |
| 403855425 | Controls maintained |
| 403855426 | Controls maintained |
| 403855427 | Controls maintained |
| 403855428 | Controls maintained |

Total Attach: 6 Files