

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:

403855457

Date Received:

07/16/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 3 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

Romana Cowden

Phone

720-951-5895

Email

COGCC.inspections@caerusoilandgas.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 708301976

Inspection Date: 04/04/2024

FIR Submit Date: 04/06/2024

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: 335013

Location Name: Riley Number: 1 County: _____

Qtrqtr: NWN Sec: 17 Twp: 7S Range: 96W Meridian: 6
W

Latitude: 39.441860 Longitude: -108.138610

FACILITY - API Number: 05-045- -00 Facility ID: 335013

Facility Name: Riley Number: 1

Qtrqtr: NWN Sec: 17 Twp: 7S Range: 96W Meridian: 6
W

Latitude: 39.441860 Longitude: -108.138610

CORRECTIVE ACTIONS:

3 ☒ CA# 194063

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: 05/06/2024

Response: CA COMPLETED

Date of Completion: 07/13/2024

Repaired.

Operator _____
Comment: _____

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 6:52:49 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>
403855457	FIR RESOLUTION SUBMITTED
403855459	Surfaces bladed/graded
403855460	Surfaces bladed/graded
403855461	Surfaces bladed/graded
403855462	Surfaces bladed/graded
403855463	Surfaces bladed/graded

Total Attach: 6 Files