

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:

402173634

Date Received:

09/11/2019

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

OGCC 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

970-285-2771

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 689703411

Inspection Date: 07/29/2019

FIR Submit Date: 07/30/2019

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: 426478

Location Name: SG Number: L24 496 County: _____

Qtrqtr: NWS Sec: 24 Twp: 4S Range: 96W Meridian: 6
W

Latitude: 39.685031 Longitude: -108.123236

FACILITY - API Number: 05-045- -00 Facility ID: 426478

Facility Name: SG Number: L24 496

Qtrqtr: NWS Sec: 24 Twp: 4S Range: 96W Meridian: 6
W

Latitude: 39.685031 Longitude: -108.123236

CORRECTIVE ACTIONS:

1 CA# 128665

Corrective Action: Install sign to comply with Rule 210.d.

Date: 09/30/2019

Response: CA COMPLETED

Date of Completion: 07/31/2019

Operator
Comment:

Label was added.

COGCC Decision: _____

COGCC
Representative:

2 CA# 128666

Corrective Action: Cover cellar and back fill around rat hole casing. Cover open casing between the 2nd and 3rd quadrant of wells.

Date: 08/15/2019

Response: CA COMPLETED

Date of Completion: 08/06/2019

Operator
Comment: Cellar was covered and filled as required.

COGCC Decision: _____

COGCC
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: 9/11/2019 3:38:13 PM

ATTACHMENT LIST

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

Document Number **Description**

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Total Attach: 0 Files