

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:
402415276

Date Received:
06/08/2020

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

720-951-5895

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 698100143

Inspection Date: 03/13/2020

FIR Submit Date: 03/17/2020

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: 423633

Location Name: KM Number: C08 799 County: _____

Qtrqr: NENW Sec: 8 Twp: 7S Range: 99W Meridian: 6

Latitude: 39.465672 Longitude: -108.466519

FACILITY - API Number: 05-045- -00 Facility ID: 423633

Facility Name: KM Number: C08 799

Qtrqr: NENW Sec: 8 Twp: 7S Range: 99W Meridian: 6

Latitude: 39.465672 Longitude: -108.466519

CORRECTIVE ACTIONS:

1 CA# 137252

Corrective Action: Comply with Rule 603.f.

Date: 03/24/2020

Response: CA COMPLETED

Date of Completion: 03/24/2020

Operator Comment: Wood debris removed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 137253

Corrective Action: Comply with Rule 603.f. Lock out and tag out unused flowline risers within 24 hours and remove unused risers within 30 days.

Date: 03/18/2020

Response: CA COMPLETED

Date of Completion: 03/18/2020

Operator
Comment:

This is an active and used flowline for fuel gas to tanks. Plug was installed and identifying label installed on riser.

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: 6/8/2020 9:49:18 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
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Total Attach: 0 Files