

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:

402496806

Date Received:

09/24/2020

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

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

Romana Cowden

Phone

720-951-5895

Email

cogcc.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693200758

Inspection Date: 09/22/2020

FIR Submit Date: 09/22/2020

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: 335200

Location Name: N. PARACHUTE-66S96W Number: 28NENW County: \_\_\_\_\_

Qtrqr: NENW Sec: 28 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.501061 Longitude: -108.117583

FACILITY - API Number: 05-045- -00 Facility ID: 335200

Facility Name: N. PARACHUTE-66S96W Number: 28NENW

Qtrqr: NENW Sec: 28 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.501061 Longitude: -108.117583

CORRECTIVE ACTIONS:

1 ☒ CA# 142210

Corrective Action: Submit a flowline pressure test that was performed before returning flowline back into service via Form 4 and email to inspector

Date: 10/06/2020

Provide Root Cause when information becomes available. Via FIRR, Supplemental eForm 19 and email to Western Integrity inspector

Response: CA COMPLETED

Date of Completion: 09/24/2020

Operator  
Comment:

Pressure test is attached and was also submitted to Richard Murray.

COGCC Decision: Approved

COGCC Representative: waiting on root cause

**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: 9/24/2020 11:26:23 AM

**ATTACHMENT LIST**

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

<b><u>Document Number</u></b>	<b><u>Description</u></b>
402496806	FIR RESOLUTION SUBMITTED
402496984	Pressure Test Results

Total Attach: 2 Files