

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:  
402517200

Date Received:  
10/22/2020

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
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>cogcc.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700403381

Inspection Date: 09/10/2020

FIR Submit Date: 09/11/2020

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: 315210

Location Name: SAGEBRUSH HILLS-61S99W Number: 30NESW County: RIO BLANCO

Qtrqr: NESW Sec: 30 Twp: 1S Range: 99W Meridian: 6

Latitude: 39.932269 Longitude: -108.549653

FACILITY - API Number: 05-103- -00 Facility ID: 230419

Facility Name: SAGEBRUSH HILLS Number: 4502

Qtrqr: NESW Sec: 30 Twp: 1S Range: 99W Meridian: 6

Latitude: 39.932269 Longitude: -108.549653

CORRECTIVE ACTIONS:

1  CA# 141842

Corrective Action: Repair or install berms or other secondary containment devices per Rule 906.d.(1).

Date: 10/10/2020

Response: CA COMPLETED

Date of Completion: 10/10/2020

Operator Comment: Tank has been taken out of service

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

2  CA# 141843

Corrective Action: Comply with Rule 603.f .

Date: 10/10/2020

Response: CA COMPLETED

Date of Completion: 10/10/2020

Operator  
Comment:

Equipment was removed.

COGCC Decision: Approved pending re-inspection

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: 10/22/2020 3:55:56 PM

**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>
402517200	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files