

State of Colorado Oil and Gas Conservation Commission

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Document Number:
403051354

Date Received:
05/17/2022

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 4 CAs from the FIR responded to on this Form

3 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: 702800148

Inspection Date: 04/21/2022

FIR Submit Date: 04/26/2022

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: 334892

Location Name: SHIDELER-66S92W Number: 32SWNE County: _____

Qtrqr: SWNE Sec: 32 Twp: 6S Range: 92W Meridian: 6

Latitude: 39.485000 Longitude: -107.689880

FACILITY - API Number: 05-045-00 Facility ID: 334892

Facility Name: SHIDELER-66S92W Number: 32SWNE

Qtrqr: SWNE Sec: 32 Twp: 6S Range: 92W Meridian: 6

Latitude: 39.485000 Longitude: -107.689880

CORRECTIVE ACTIONS:

1 CA# 161284

Corrective Action: Eliminate possibility of wildlife/personnel to enter open holes/trenches.

Date: 04/28/2022

Response: CA COMPLETED

Date of Completion: 04/28/2022

Operator Comment: Extended wildlife protection around excavation.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 161285

Corrective Action: Install proper marker or remove anchor per Rule 1003.a.

Date: 05/10/2022

Response: CA COMPLETED

Date of Completion: 05/06/2022

Operator Comment: Removed anchor.

COGCC Decision: _____

COGCC Representative: _____

4 CA# 161287

Corrective Action: Comply with 1002.f.

Date: 05/24/2022

Response: CA COMPLETED

Date of Completion: 05/06/2022

Operator Comment: Raked and seeded all erosion throughout location.

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: 5/17/2022 10:03:30 AM

ATTACHMENT LIST

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

Document Number	Description

Total Attach: 0 Files