

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:

403143507

Date Received:

08/22/2022

FIR RESOLUTION FORM

Overall Status:

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

Phone

Email

Romana Cowden

720-951-5895

COGCC.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702800418

Inspection Date: 07/01/2022

FIR Submit Date: 07/07/2022

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: 323927

Location Name: SHAEFER-67S93W Number: 12SENE County: \_\_\_\_\_

Qtrqr: SENE Sec: 12 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.461420 Longitude: -107.717070

FACILITY - API Number: 05-045- -00 Facility ID: 323927

Facility Name: SHAEFER-67S93W Number: 12SENE

Qtrqr: SENE Sec: 12 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.461420 Longitude: -107.717070

CORRECTIVE ACTIONS:

1 CA# 163157

Corrective Action: Comply with 1004 rules: Remove all remaining equipment and trash/debris. Perform compaction alleviation (cross ripping to a minimum depth of 18 inches) or provide documentation of compaction alleviation if this work has already been completed per 1004 Rules.

Date: 08/04/2022

Response: CA COMPLETED

Date of Completion: 07/15/2022

Operator Comment: Seed bed was prepped, roughened, crossrippled, amended and seeded prior to the inspection as part of the reclamation, 6/14/2022. Trash and debris removed, also removed anchor deadman 7/15/2022.

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: 8/22/2022 2:59:02 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