

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:  
403344522

Date Received:  
03/13/2023

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

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

0 CA Completed  
1 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: 708900102

Inspection Date: 03/09/2023

FIR Submit Date: 03/10/2023

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: 335856

Location Name: N. PARACHUTE-66S96W Number: 9SWNW County: GARFIELD

Qtrqr: SWN Sec: 9 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.539360 Longitude: -108.118504

#### FACILITY - API Number: 05-045- -00 Facility ID: 293450

Facility Name: N. Parachute Number: MF10B E09 696

Qtrqr: SWN Sec: 9 Twp: 6S Range: 96W Meridian: 6

Latitude: 39.539360 Longitude: -108.118504

### CORRECTIVE ACTIONS:

3 CA# 168049

Corrective Action: The Operator will conspicuously post and maintain the date of the last meter calibration in a legible condition at each meter at all times.

Date: 03/20/2023

Response: FACTUAL REVIEW REQUEST

Basis for Review: Action requested was already completed prior to the inspection

Meter data card is attached to each meter tube inside the meter skid, and contains the date of the last meter calibration. Full records are available by request per the rule. Caerus believes we are compliance with this rule.

Operator Comment:	
COGCC Decision:	
COGCC Representative:	

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
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: 3/13/2023 2:41:37 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>

Total Attach: 0 Files