

State of Colorado  
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403544105

Date Received:

09/28/2023

## 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

Romana Cowden

Phone

720-951-5895

Email

COGCC.inspections@caerusoilandgas.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 707800565

Inspection Date: 08/24/2023

FIR Submit Date: 08/29/2023

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: 427395

Location Name: Federal Number: 21-9C (PJ-21) County: \_\_\_\_\_

Qtrqr: NWSE Sec: 21 Twp: 7S Range: 95W Meridian: 6

Latitude: 39.421549 Longitude: -107.999913

### FACILITY - API Number: 05-045-00 Facility ID: 427395

Facility Name: Federal Number: 21-9C (PJ-21)

Qtrqr: NWSE Sec: 21 Twp: 7S Range: 95W Meridian: 6

Latitude: 39.421549 Longitude: -107.999913

### CORRECTIVE ACTIONS:

1 CA# 179786

Corrective Action: Install cap/plug

Date: 10/06/2023

Response: CA COMPLETED

Date of Completion: 09/07/2023

Operator Comment: Replaced.

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: 9/28/2023 9:38:59 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