

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:

403686243

Date Received:

02/13/2024

## FIR RESOLUTION FORM

**Overall Status:**

CA Summary:

2 of 5 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

Romana Cowden

Phone

720-951-5895

Email

COGCC.inspections@caerusoilandgas.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 696205507

Inspection Date: 01/05/2024

FIR Submit Date: 01/09/2024

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: 334610

Location Name: BASS-67S93W Number: 14SWNE County: \_\_\_\_\_

Qtrqtr: SWNE Sec: 14 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.446130 Longitude: -107.741310

### FACILITY - API Number: 05-045- -00 Facility ID: 334610

Facility Name: BASS-67S93W Number: 14SWNE

Qtrqtr: SWNE Sec: 14 Twp: 7S Range: 93W Meridian: 6

Latitude: 39.446130 Longitude: -107.741310

### CORRECTIVE ACTIONS:

1 CA# 189940

Corrective Action: Install or repair BMP to ensure containment measure remains impervious to contain a spill or release.

Date: 01/05/2024

Response: CA COMPLETED

Date of Completion: 01/09/2024

Operator Comment: Liner was repaired.

COGCC Decision: \_\_\_\_\_

COGCC Representative:			
<b>3</b>	CA# 189942		
Corrective Action:	Comply with 606 Rules.	Date: 01/05/2024	
Response:	CA COMPLETED	Date of Completion: 01/09/2024	
Operator Comment:	Removed.		
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: 2/13/2024 2:51:26 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