

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:  
403734012

Date Received:  
03/28/2024

## FIR RESOLUTION FORM

**Overall Status:**

CA Summary:

2 of 3 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: 696205596

Inspection Date: 02/05/2024

FIR Submit Date: 02/08/2024

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: 335793

Location Name: CSOC 696-18-66S96W

Number: 17NESW

County: \_\_\_\_\_

Qtrqtr: NESW

Sec: 17

Twp: 6S

Range: 96W

Meridian: 6

Latitude: 39.521110

Longitude: -108.134110

### FACILITY - API Number: 05-045-

-00

Facility ID: 335793

Facility Name: CSOC 696-18-66S96W

Number: 17NESW

Qtrqtr: NESW

Sec: 17

Twp: 6S

Range: 96W

Meridian: 6

Latitude: 39.521110

Longitude: -108.134110

### CORRECTIVE ACTIONS:

1 CA# 191853

Corrective Action: Comply with 603.i

Date: 03/08/2024

Response: CA COMPLETED

Date of Completion: 02/12/2024

Operator  
Comment:

Cap was installed, see photo.

COGCC Decision:

COGCC Representative:			
3	CA# 191855		
Corrective Action:	Install or repair required BMPs in accordance with good engineering practices per Rule 1002.f.(2)C	Date: <u>02/10/2024</u>	
Response:	CA COMPLETED	Date of Completion: <u>03/11/2024</u>	
Operator Comment:	Berm was repaired, erosion was repaired. See photo.		
COGCC Decision:			
COGCC Representative:			

<b><u>OPERATOR COMMENT AND SUBMITTAL</u></b>	
Comment:	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: <u>Romana Cowden</u>	Signed: _____
Title: <u>EHS</u>	Date: <u>3/28/2024 6:22:11 AM</u>

### 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>
403734013	Erosion Repair
403734015	Cap installed

Total Attach: 2 Files