

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:
403742970

Date Received:
04/04/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

3 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
<u>Romana Cowden</u>	<u>720-951-5895</u>	<u>COGCC.inspections@caerusoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 708301600
Inspection Date: 01/30/2024 FIR Submit Date: 01/31/2024 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: 335642

Location Name: N PARACHUTE Number: WF08D-26H26A596 County: _____
Qtrqr: SENE Sec: 26 Twp: 5S Range: 96W Meridian: 6
Latitude: 39.588220 Longitude: -108.129960

FACILITY - API Number: 05-045-00 Facility ID: 335642

Facility Name: N PARACHUTE Number: WF08D-26H26A596
Qtrqr: SENE Sec: 26 Twp: 5S Range: 96W Meridian: 6
Latitude: 39.588220 Longitude: -108.129960

CORRECTIVE ACTIONS:

1 CA# 191583

Corrective Action: Remove stored equipment from location to comply with Rule 606. Date: 03/01/2024

Response: CA COMPLETED Date of Completion: 04/01/2024

Operator Comment: Stairs were re-placed and secured.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 191584

Corrective Action: Date: 03/01/2024

Response: CA COMPLETED Date of Completion: 02/26/2024

Operator Comment:

COGCC Decision: _____

COGCC Representative: _____

3 CA# 191585

Corrective Action: Date: 03/01/2024

Response: CA COMPLETED Date of Completion: 04/01/2024

Operator Comment:

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: 4/4/2024 12:39:54 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>
403742974	battery sign

Total Attach: 1 Files