

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:

403744244

Date Received:

04/05/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 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

Romana Cowden

Phone

720-951-5895

Email

COGCC.inspections@caerusoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 708301719

Inspection Date: 02/20/2024

FIR Submit Date: 02/22/2024

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: 335658

Location Name: CHEVRON Number: 036B 596 County: _____

Qtrqtr: SWSE Sec: 36 Twp: 5S Range: 96W Meridian: 6

Latitude: 39.567198 Longitude: -108.114538

FACILITY - API Number: 05-045- -00 Facility ID: 335658

Facility Name: CHEVRON Number: 036B 596

Qtrqtr: SWSE Sec: 36 Twp: 5S Range: 96W Meridian: 6

Latitude: 39.567198 Longitude: -108.114538

CORRECTIVE ACTIONS:

1 CA# 192337

Corrective Action: Secure or protect vent line to comply with Rule 608.e.

Date: 02/27/2024

Response: CA COMPLETED

Date of Completion: 02/28/2024

Operator
Comment:

Protection already in place, see photo.

COGCC Decision: _____

	COGCC Representative:			
2	CA# 192338			
Corrective Action:		Install sign to comply with Rule 605.e.	Date: 03/23/2024	
Response:		CA COMPLETED	Date of Completion: 04/01/2024	
Operator Comment:		Replaced, see photo.		
COGCC Decision: _____				
COGCC Representative:				
3	CA# 192339			
Corrective Action:		Install sign to comply with Rule 605.e.	Date: 03/23/2024	
Response:		CA COMPLETED	Date of Completion: 03/01/2024	
Operator Comment:		Installed, see photo.		
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: 4/5/2024 9:24:07 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

Document Number	Description
403744292	Battery sign/label
403744308	cap was already in place

Total Attach: 2 Files