

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:  
403759071

Date Received:  
04/18/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

ECMC 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>

ECMC INSPECTION SUMMARY:

FIR Document Number: 708301710  
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: 335566

Location Name: CHEVRON-66S96W Number: 4SWSW County: \_\_\_\_\_  
Qtrqtr: SWS Sec: 4 Twp: 6S Range: 96W Meridian: 6  
W  
Latitude: 39.548470 Longitude: -108.120060

FACILITY - API Number: 05-045-00 Facility ID: 335566

Facility Name: CHEVRON-66S96W Number: 4SWSW  
Qtrqtr: SWS Sec: 4 Twp: 6S Range: 96W Meridian: 6  
W  
Latitude: 39.548470 Longitude: -108.120060

CORRECTIVE ACTIONS:

1  CA# 192313

Corrective Action: 1002.f.(2): Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to control Stormwater runoff in a manner that minimizes erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved pursuant to Rule 1004.

Date: 03/08/2024

Response: CA COMPLETED Date of Completion: 03/11/2023

Repaired, see photos.

Operator  
Comment:

ECMC Decision: Approved pending re-inspection

ECMC  
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: 4/18/2024 6:06:09 AM

**ATTACHMENT LIST**

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

<u>Document Number</u>	<u>Description</u>
403759071	FIR RESOLUTION SUBMITTED
403759072	Tracking repaired
403759073	Tracking repaired

Total Attach: 3 Files