

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:
403504876

Date Received:
08/22/2023

FIR RESOLUTION FORM

Overall Status: FRQ

CA Summary:

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

0 CA Completed
1 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: 708901368
Inspection Date: 08/15/2023 FIR Submit Date: 08/16/2023 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: 334934

Location Name: SHAEFFER-67S93W Number: 1SESW County: _____
Qtrqr: SESW Sec: 1 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.469370 Longitude: -107.725660

FACILITY - API Number: 05-045-00 Facility ID: 334934

Facility Name: SHAEFFER-67S93W Number: 1SESW
Qtrqr: SESW Sec: 1 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.469370 Longitude: -107.725660

CORRECTIVE ACTIONS:

4 CA# 178608

Corrective Action: Operators shall implement BMPs in accordance with good engineering practices, including measures such as: Materials handling and spill prevention procedures and practices implemented for material handling and spill prevention of materials used, stored, or disposed of that could result in discharges causing pollution of surface waters.

Date: 08/21/2023

Response: FACTUAL REVIEW REQUEST

Basis for Review: Action requested was already completed prior to the inspection

3/8 full is below our threshold for maintaining this equipment. Our operator will keep a close eye on it and pull the containment if more stormwater accumulates.

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: 8/22/2023 10:29:18 AM

ATTACHMENT LIST

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

Document Number **Description**

403504876	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files