

State of Colorado  
Energy & Carbon Management Commission



Document Number:  
403792683

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Date Received:  
05/16/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 4 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                                 |
|---------------|--------------|---------------------------------------|
| Romana Cowden | 720-951-5895 | COGCC.inspections@caerusoilandgas.com |

ECMC INSPECTION SUMMARY:

FIR Document Number: 696205567  
Inspection Date: 01/22/2024 FIR Submit Date: 01/24/2024 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: 334670

Location Name: MILLER-67S93W Number: 2NWSE County:  
Qtrqtr: NWSE Sec: 2 Twp: 7S Range: 93W Meridian: 6  
Latitude: 39.472930 Longitude: -107.741830

FACILITY - API Number: 05-045-00 Facility ID: 334670

Facility Name: MILLER-67S93W Number: 2NWSE  
Qtrqtr: NWSE Sec: 2 Twp: 7S Range: 93W Meridian: 6  
Latitude: 39.472930 Longitude: -107.741830

CORRECTIVE ACTIONS:

4 CA# 191299

Corrective Action: Conduct additional weed management efforts required during the 2024 growing season to comply with Rules 1003.f and 606.c. Date provided is not the date ECMC expects the Location to have met the CA; rather it is the date the compliance issue was observed.

Date: 01/22/2024

Response: CA COMPLETED Date of Completion: 04/23/2024

Operator Comment: Site was inspected and thistle rosettes removed.

ECMC Decision: \_\_\_\_\_

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: 5/16/2024 6:12:42 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> |
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Total Attach: 0 Files