

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:

403923312

Date Received:

09/17/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

2 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

Caerus

Phone

(970) 285-2600

Email

COGCC.inspections@caerusoilandgas.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 715500610

Inspection Date: 09/03/2024

FIR Submit Date: 09/03/2024

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: 335713

Location Name: FREEDOM UNIT-297 Number: 17-A County: _____

Qtrqtr: NWSE Sec: 17 Twp: 2S Range: 97W Meridian: 6

Latitude: 39.874072 Longitude: -108.301455

FACILITY - API Number: 05-103-00 Facility ID: 335713

Facility Name: FREEDOM UNIT-297 Number: 17-A

Qtrqtr: NWSE Sec: 17 Twp: 2S Range: 97W Meridian: 6

Latitude: 39.874072 Longitude: -108.301455

CORRECTIVE ACTIONS:

1 CA# 198295

Corrective Action: All stacks, vents, or other openings will be equipped with screens or other appropriate equipment to prevent entry by wildlife, including birds and bats.

Date: 09/14/2024

Response: CA COMPLETED

Date of Completion: 09/10/2024

Operator Comment: all caps were replaced

ECMC Decision: _____

ECMC Representative:			
2	CA# 198296		
Corrective Action:	Vents on pressure safety devices will terminate in a manner so as not to endanger the public or adjoining facilities. They will be designed to be clear and free of debris and water at all times.		Date: <u>09/19/2024</u>
Response:	<u>CA COMPLETED</u>	Date of Completion:	<u>09/10/2024</u>
Operator Comment:	caps were replaced		
ECMC Decision:			
ECMC Representative:			

<u>OPERATOR COMMENT AND SUBMITTAL</u>	
Comment:	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.	
Print Name: <u>Nick Croy</u>	Signed: _____
Title: <u>Compliance</u>	Date: <u>9/17/2024 7:58:51 AM</u>

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>

Total Attach: 0 Files