

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:

404011618

Date Received:

12/02/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 5 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

Energy_QB

(970) 285-2600

ecmc.inspections@qb-energy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 715500928

Inspection Date: 11/05/2024

FIR Submit Date: 11/05/2024

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: 336018

Location Name: FREEDOM UNIT-61S97W Number: 33SWSE County: _____

Qtrqtr: SWSE Sec: 33 Twp: 1S Range: 97W Meridian: 6

Latitude: 39.915499 Longitude: -108.285683

FACILITY - API Number: 05-103- -00 Facility ID: 336018

Facility Name: FREEDOM UNIT-61S97W Number: 33SWSE

Qtrqtr: SWSE Sec: 33 Twp: 1S Range: 97W Meridian: 6

Latitude: 39.915499 Longitude: -108.285683

CORRECTIVE ACTIONS:

1 CA# 200283

Corrective Action: When no associated Tank battery is present at the Oil and Gas Location, the following information is required on the Well sign: Name of the Operator; Telephone number at which the Operator can be reached at all times; Telephone number for local emergency services (911 where available); The public road used to access the Well; Well name(s) and API number(s); The legal location of the Well(s) including the quarter/quarter section.

Date: 12/06/2024

Response: CA COMPLETED

Date of Completion: 11/27/2024

Operator Comment: sign was installed

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: Nick Croy

Signed:

Title: Compliance

Date: 12/2/2024 11:13:07 AM

ATTACHMENT LIST

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

Document Number **Description**

404011618	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files