

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:  
404046531

Date Received:  
01/03/2025

FIR RESOLUTION FORM

Overall Status:

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
Energy_QB	(970) 285-2600	ecmc.inspections@qb-energy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 715500940  
Inspection Date: 11/26/2024 FIR Submit Date: 11/26/2024 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: 336008

Location Name: FREEDOM UNIT-62S97W Number: 28SENE County:  
Qtrqtr: SENE Sec: 28 Twp: 2S Range: 97W Meridian: 6  
Latitude: 39.848599 Longitude: -108.278183

FACILITY - API Number: 05-103-00 Facility ID: 336008

Facility Name: FREEDOM UNIT-62S97W Number: 28SENE  
Qtrqtr: SENE Sec: 28 Twp: 2S Range: 97W Meridian: 6  
Latitude: 39.848599 Longitude: -108.278183

CORRECTIVE ACTIONS:

1 CA# 200737

Corrective Action: The Tank battery sign will be no less than 3 square feet and no more than 6 square feet, and will provide: 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 Tank battery site; Well name(s) and API number(s) associated with the Tank battery and the legal location of the Well (s); and Location, including the quarter/quarter section, of the Tank battery.

Date: 12/27/2024

Response: CA COMPLETED Date of Completion: 12/18/2024

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: 1/3/2025 7:31:47 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

404046531	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files