

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:  
401777013

Date Received:  
09/27/2018

## FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

1 CA Completed  
0 Factual Review Request

### OPERATOR INFORMATION

OGCC 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

Lindsey Rider

970-285-2711

cogcc.inspections@caerusoilandgas.com

### COGCC INSPECTION SUMMARY:

FIR Document Number: 693200002

Inspection Date: 08/21/2018

FIR Submit Date: 08/23/2018

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: 413476

Location Name: Savage Number: 8A-794 County: GARFIELD

Qtrqr: NENE Sec: 8 Twp: 7S Range: 94W Meridian: 6

Latitude: 39.458326 Longitude: -107.906218

### FACILITY - API Number: 05-045- -00 Facility ID: 412724

Facility Name: Savage Number: 41D-8

Qtrqr: NENE Sec: 8 Twp: 7S Range: 94W Meridian: 6

Latitude: 39.458326 Longitude: -107.906218

### CORRECTIVE ACTIONS:

2 ☒ CA# 118289

Corrective Action: unused , unmarked flowline risers 24 hrs to lock out tag out. 30 days to remove riser. Comply with Rule 603.f .

Date: 09/21/2018

Response: CA COMPLETED

Date of Completion: 09/21/2018

Operator Comment: The flex steel line has been removed (black pipe riser in inspection photos), remaining risers have been capped or blind flanged. All futures have been labeled with the "do not operate this equipment" stickers.

COGCC Decision: Approved

COGCC  
Representative: Verified

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: Lindsey Rider

Signed: \_\_\_\_\_

Title: EHS Lead

Date: 9/27/2018 2:30:18 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

401777013	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files