

**FORM
INSP**Rev
05/11**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

05/19/2016

Document Number:

666802178

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

| | | | | | |
|---------------------|-------------|--------|-----------------|--------------------------|-------------|
| Location Identifier | Facility ID | Loc ID | Inspector Name: | On-Site Inspection | 2A Doc Num: |
| | 298550 | 335023 | Murray, Richard | <input type="checkbox"/> | |

Operator Information:OGCC Operator Number: 10456Name of Operator: CAERUS PICEANCE LLCAddress: 1001 17TH STREET #1600City: DENVER State: CO Zip: 80202

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED
- ☐ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

| Contact Name | Phone | Email | Comment |
|------------------|-------|-----------------------------|---------|
| McKee, Michael | | MMckee@caerusoilandgas.com | EHS |
| Elsener, Garrett | | garrett@caerusoilandgas.com | |

Compliance Summary:QtrQtr: SENW Sec: 17 Twp: 7S Range: 94W

| Insp. Date | Doc Num | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 06/22/2010 | 200275700 | PR | WO | SATISFACTORY | | | No |

Inspector Comment:**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status | |
|-------------|------|--------|-------------|------------|-----------|------------------------|-------------|-------------------------------------|
| 210980 | WELL | AL | 12/20/1991 | LO | 045-06738 | FEE F-17-7-94-S | AL | <input type="checkbox"/> |
| 298546 | WELL | PR | 08/03/2009 | GW | 045-17242 | RULISON FEDERAL 17-32C | PR | <input checked="" type="checkbox"/> |
| 298547 | WELL | PR | 04/28/2010 | GW | 045-17243 | RULISON FEDERAL 17-11B | PR | <input checked="" type="checkbox"/> |
| 298549 | WELL | PR | 11/07/2009 | GW | 045-17244 | RULISON FEDERAL 17-11A | PR | <input checked="" type="checkbox"/> |
| 298550 | WELL | PR | 09/18/2009 | GW | 045-17245 | RULISON FEDERAL 17-11D | PR | <input checked="" type="checkbox"/> |
| 298551 | WELL | PR | 10/02/2009 | GW | 045-17246 | RULISON FEDERAL 17-32B | PR | <input checked="" type="checkbox"/> |
| 298552 | WELL | PR | 09/19/2009 | GW | 045-17247 | RULISON FEDERAL 17-32A | PR | <input checked="" type="checkbox"/> |
| 298553 | WELL | PR | 10/19/2009 | GW | 045-17248 | RULISON FEDERAL 17-31D | PR | <input checked="" type="checkbox"/> |
| 298554 | WELL | PR | 10/31/2009 | GW | 045-17249 | JONES 17-21B | PR | <input checked="" type="checkbox"/> |

Inspector Name: Murray, Richard

| | | | | | | | | |
|--------|------|----|------------|----|-----------|------------------------|----|-------------------------------------|
| 298555 | WELL | PR | 10/03/2009 | GW | 045-17250 | JONES 17-21A | PR | <input checked="" type="checkbox"/> |
| 298556 | WELL | PR | 08/18/2009 | GW | 045-17251 | JONES 17-22C | PR | <input checked="" type="checkbox"/> |
| 298557 | WELL | PR | 05/15/2010 | GW | 045-17252 | JONES 17-21D | PR | <input checked="" type="checkbox"/> |
| 298558 | WELL | PR | 06/28/2010 | GW | 045-17253 | JONES 17-22A | PR | <input checked="" type="checkbox"/> |
| 298559 | WELL | PR | 01/25/2011 | GW | 045-17254 | JONES 17-22B | PR | <input checked="" type="checkbox"/> |
| 298586 | WELL | PR | 09/05/2009 | GW | 045-17267 | RULISON FEDERAL 17-12A | PR | <input checked="" type="checkbox"/> |
| 298587 | WELL | PR | 07/31/2009 | GW | 045-17268 | RULISON FEDERAL 17-12C | PR | <input checked="" type="checkbox"/> |
| 298588 | WELL | PR | 10/18/2009 | GW | 045-17269 | RULISON FEDERAL 17-12B | PR | <input checked="" type="checkbox"/> |
| 299023 | WELL | PR | 05/14/2010 | GW | 045-17539 | JONES 17-21C | PR | <input checked="" type="checkbox"/> |
| 299024 | WELL | PR | 08/28/2009 | GW | 045-17540 | RULISON FEDERAL 17-11C | PR | <input checked="" type="checkbox"/> |

Equipment:Location Inventory

| | | | |
|------------------------------|------------------------|---------------------|-------------------------|
| Special Purpose Pits: _____ | Drilling Pits: _____ | Wells: _____ | Production Pits: _____ |
| Condensate Tanks: _____ | Water Tanks: _____ | Separators: _____ | Electric Motors: _____ |
| Gas or Diesel Mortors: _____ | Cavity Pumps: _____ | LACT Unit: _____ | Pump Jacks: _____ |
| Electric Generators: _____ | Gas Pipeline: _____ | Oil Pipeline: _____ | Water Pipeline: _____ |
| Gas Compressors: _____ | VOC Combustor: _____ | Oil Tanks: _____ | Dehydrator Units: _____ |
| Multi-Well Pits: _____ | Pigging Station: _____ | Flare: _____ | Fuel Tanks: _____ |

Location**Lease Road:**

| Type | Satisfactory/Action Required | comment | Corrective Action | Date |
|------|------------------------------|---------|-------------------|------|
| | | | | |

Signs/Marker:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|---------|------------------------------|---------|-------------------|---------|
| BATTERY | SATISFACTORY | | | |

Emergency Contact Number (S/AR): SATISFACTORY

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:

| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
|------|------------------------------|---------|-------------------|---------|
| | | | | |

Spills:

| Type | Area | Volume | Corrective action | CA Date |
|------|------|--------|-------------------|---------|
| | | | | |

☐ Multiple Spills and Releases?

| | | | | |
|------------------|------------------------------|---------|-------------------|---------|
| Fencing/: | | | | |
| Type | Satisfactory/Action Required | Comment | Corrective Action | CA Date |
| | | | | |

| | | | | |
|-----------------------------------|------|-------------------------------|--------------|-------|
| Equipment: | | | | |
| Type: Pig Station | # 1 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Plunger Lift | # 18 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |
| Type: Horizontal Heated Separator | # 18 | Satisfactory/Action Required: | SATISFACTORY | |
| Comment | | | | |
| Corrective Action | | | | Date: |

| | | | | |
|-----------------------------------|--------------|----------------|-----------|-----------------------|
| Facilities: | | | | |
| <input type="checkbox"/> New Tank | | Tank ID: _____ | | |
| Contents | # | Capacity | Type | SE GPS |
| CONDENSATE | 9 | 400 BBLS | STEEL AST | 39.439350,-107.911100 |
| S/AR | SATISFACTORY | Comment: | | |
| Corrective Action: | | | | Corrective Date: |

| | |
|------------------|----------|
| Paint | |
| Condition | Adequate |
| Other (Content) | _____ |
| Other (Capacity) | _____ |
| Other (Type) | _____ |

| | | | | |
|-------------------|----------|---------------------|---------------------|-----------------|
| Berms | | | | |
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Corrective Action | | | | Corrective Date |
| Comment | | | | |

| | |
|-----------------|----|
| Venting: | |
| Yes/No | NO |
| Comment | |

| | | | |
|--------------------|--|------------------------------|--|
| Flaring: | | | |
| Type | | Satisfactory/Action Required | |
| Comment: | | | |
| Corrective Action: | | Correct Action Date: | |

Predrill

Location ID: 298550

Lease Road Adeq.: _____

Pads: _____

Soil Stockpile: _____

S/AR: _____

Corrective Action: _____

Date: _____

CDP Num.: _____

Form 2A COAs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

Wildlife BMPs:

S/AR: _____ Comment: _____

CA: _____ Date: _____

Comment: _____

Staking:**On Site Inspection (305):**Surface Owner Contact Information:

Name: _____

Address: _____

Phone Number: _____

Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____

Phone Number: _____

Date Onsite Request Received: _____

Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 298546 Type: WELL API Number: 045-17242 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 298547 Type: WELL API Number: 045-17243 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 298549 Type: WELL API Number: 045-17244 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 298550 Type: WELL API Number: 045-17245 Status: PR Insp. Status: PR

| | | | | |
|------------------------------|------------|-----------------------|------------|------------------|
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298551 | Type: WELL | API Number: 045-17246 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298552 | Type: WELL | API Number: 045-17247 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298553 | Type: WELL | API Number: 045-17248 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298554 | Type: WELL | API Number: 045-17249 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298555 | Type: WELL | API Number: 045-17250 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298556 | Type: WELL | API Number: 045-17251 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298557 | Type: WELL | API Number: 045-17252 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298558 | Type: WELL | API Number: 045-17253 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298559 | Type: WELL | API Number: 045-17254 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298586 | Type: WELL | API Number: 045-17267 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |
| Facility ID: 298587 | Type: WELL | API Number: 045-17268 | Status: PR | Insp. Status: PR |
| Producing Well | | | | |
| Comment: Plunger lift | | | | |

Inspector Name: Murray, Richard

Facility ID: 298588 Type: WELL API Number: 045-17269 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 299023 Type: WELL API Number: 045-17539 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Facility ID: 299024 Type: WELL API Number: 045-17540 Status: PR Insp. Status: PR

Producing Well

Comment: Plunger lift

Environmental

Spills/Releases:

Type of Spill: Description: Estimated Spill Volume:

Comment:

Corrective Action: Date:

Reportable: GPS: Lat Long

Proximity to Surface Water: Depth to Ground Water:

Water Well:

DWR Receipt Num: Owner Name: GPS : Lat Long

Field Parameters:

Sample Location:

Emission Control Burner (ECB): N

Comment:

Pilot: Wildlife Protection Devices (fired vessels): YES

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: Date Interim Reclamation Completed:

Land Use:

Comment:

1003a. Waste and Debris removed? Pass

CM

CA CA Date

Unused or unneeded equipment onsite? Pass

CM

CA CA Date

Pit, cellars, rat holes and other bores closed? Pass

Inspector Name: Murray, Richard

CM _____

CA _____

CA Date _____

Guy line anchors marked? _____

CM _____

CA _____

CA Date _____

1003b. Area no longer in use? _____

Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____

Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____

Recontoured _____

Perennial forage re-established _____

Non-Cropland

Top soil replaced _____

Recontoured _____

80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____

Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____

Pit mouse/rat holes, cellars backfilled _____

Debris removed _____

No disturbance /Location never built _____

Access Roads Regraded _____

Contoured _____

Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured _____

Compaction alleviation _____

Dust and erosion control _____

Non cropland: Revegetated 80% _____

Cropland: perennial forage _____

Weeds present _____

Subsidence _____

Comment: _____

Corrective Action: _____

Date _____

Overall Final Reclamation _____

Well Release on Active Location ☐

Multi-Well Location ☐

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Gravel | Pass | | | |
| | | Culverts | Pass | | | |

Inspector Name: Murray, Richard

| | | | | | |
|---------|------|----------------|------|--|--|
| Rip Rap | Pass | | | | |
| | | Ditches | Pass | | |
| Ditches | Pass | | | | |
| | | Sediment Traps | Pass | | |
| | | Rip Rap | Pass | | |
| Seeding | Pass | | | | |
| Berms | Pass | | | | |

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|---------------------|---|
| 666802178 | INSPECTION APPROVED | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3862184 |