

**FORM
INSP**Rev
X/15**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:

01/27/2017

Submitted Date:

01/31/2017

Document Number:

674703587**FIELD INSPECTION FORM**
 Loc ID 416157 Inspector Name: LONGWORTH, MIKE On-Site Inspection ☐ 2A Doc Num: _____
Operator Information:OGCC Operator Number: 10456Name of Operator: CAERUS PICEANCE LLCAddress: 1001 17TH STREET #1600City: DENVER State: CO Zip: 80202**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

Findings:1 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Elsener, Garrett		garrett@caerusoilandgas.com	
McKee, Michael		MMckee@caerusoilandgas.com	
Janicek, Jake		JJanicek@caerusoilandgas.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
448169	WELL	XX	10/23/2016		045-23358	Puckett 32A-26-697	DG

General Comment:

Location

Lease Road:			
Type	Access		
comment:	Snow packed		
Corrective ActionL		Date:	

Overall Good: ☒

Signs/Marker:			
Type	DRILLING/RECOMP		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: ☐ Multiple Spills and Releases?**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 448169 Type: WELL API Number: 045-23358 Status: XX Insp. Status: DG**Well Drilling**

Rig: Rig Name: H&P 330 Pusher/Rig Manager: Whitey
Permit Posted: _____ Access Sign: _____

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydril Type: YES
Pressure Test BOP: Pass Test Pressure PSI: 2450 Safety Plan: YES

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
Multi-Well: YES Disposal Location: _____

Comment: _____

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
				Material Handling And Spill Prevention	Pass	
				Covering Materials	Pass	

Comment:

Corrective Action:

Date:

Pits: ☐ NO SURFACE INDICATION OF PIT