

**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:

10/05/2018

Submitted Date:

10/20/2018

Document Number:

679701221**FIELD INSPECTION FORM**

Loc ID 316390 Inspector Name: Moran, Rick 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:7 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE**

Contact Information:

| Contact Name | Phone | Email | Comment |
|-------------------|--------------|---|--|
| Elsenser, Garrett | 720-880-6340 | cogcc.inspections@caerusoila ndgas.com | All Piceance inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------------------|-------------|
| 271879 | WELL | PR | 10/10/2007 | GW | 103-10427 | EUREKA UNIT 8812C L20 397 | PR |

General Comment:[routine well inspection](#)

LocationOverall Good: ☒**Signs/Marker:**

| | | | |
|--------------------|----------|-------|--|
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 800-791-7691

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

| | | | | |
|------|------|--------|--|--|
| Type | Area | Volume | | |
|------|------|--------|--|--|

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

| | | | |
|--------------------|--------------|-------|--|
| Type | WELLHEAD | | |
| Comment: | tank battery | | |
| Corrective Action: | | Date: | |
| Type | TANK BATTERY | | |
| Comment: | hog panel | | |
| Corrective Action: | | Date: | |

Equipment:

| | | | |
|-----------------------------------|-----|-------|-----------------|
| Type: Horizontal Heated Separator | # 1 | | corrective date |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| | | | | | | |
|--------------------|---|----------|-----------|---------|--------|-------|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| CONDENSATE | 1 | 300 BBLS | STEEL AST | | , | |
| Comment: | | | | | | |
| Corrective Action: | | | | | | 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 |
| Comment: | | | | |
| Corrective Action: | | Date: | | |

| | | | | | | |
|--------------------|---|----------|-----------|---------|--------|--|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| PRODUCED WATER | 2 | 300 BBLS | STEEL AST | | , | |
| Comment: | | | | | | |
| Corrective Action: | | 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 |
| Comment: | | | | |
| Corrective Action: | | Date: | | |

| | | | | | | |
|--------------------|---|------------|-----------|---------|--------|--|
| Contents | # | Capacity | Type | Tank ID | SE GPS | |
| METHANOL | 3 | <50 BBLS | STEEL AST | | , | |
| Comment: | | 500 gallon | | | | |
| Corrective Action: | | Date: | | | | |

Paint

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

Berms

| | | | | |
|------|----------|---------------------|---------------------|-------------|
| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|------|----------|---------------------|---------------------|-------------|

Inspector Name: Moran, Rick

| | | | | | |
|--------------------|----------|-----------------|-----------------|----------|-------|
| Metal | Adequate | Walls Sufficent | Base Sufficient | Adequate | |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Venting:

| | | | |
|--------------------|----|--|-------|
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Flaring:

| | | | |
|--------------------|--|--|-------|
| Type | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Inspected FacilitiesFacility ID: 271879 Type: WELL API Number: 103-10427 Status: PR Insp. Status: PR**Producing Well**Comment: [producing well](#)

Corrective Action:

Date:

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

| Document Num | Description | URL |
|--------------|------------------|---|
| 679701222 | inspection photo | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4616363 |