

**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

DE	ET	OE	ES
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Inspection Date:

04/20/2015

Document Number:

675201464

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	334376	334376	CONKLIN, CURTIS	<input type="checkbox"/>	

Operator Information:OGCC Operator Number: 10456Name of Operator: CAERUS PICEANCE LLCAddress: 600 17TH STREET #1600NCity: 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
Naeve, Natalie		NNaeve@caerusoilandgas.com	Operations Engineer
McKee, Michael		MMckee@caerusoilandgas.com	EHS

Compliance Summary:QtrQtr: NESE Sec: 35 Twp: 7S Range: 96W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
10/07/2014	675200640			SATISFACTORY			No
05/23/2013	663801052			SATISFACTORY	I		No

Inspector Comment:**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
295845	WELL	PR	05/06/2010	GW	045-15821	PARACHUTE RANCH FEDERAL 35-32D	PR	<input checked="" type="checkbox"/>
295854	WELL	PR	02/28/2010	GW	045-15829	MCNEIL FEDERAL 35-33D	PR	<input checked="" type="checkbox"/>
295855	WELL	PR	02/26/2010	GW	045-15830	PARACHUTE RANCH FEDERAL 35-43D	PR	<input checked="" type="checkbox"/>
295856	WELL	PR	02/13/2010	GW	045-15831	PARACHUTE RANCH FEDERAL 35-33C	PR	<input checked="" type="checkbox"/>
295857	WELL	PR	02/11/2010	GW	045-15832	PARACHUTE RANCH FEDERAL 35-33B	PR	<input checked="" type="checkbox"/>
295859	WELL	PR	05/09/2010	GW	045-15833	PARACHUTE RANCH FEDERAL 35-42C	PR	<input checked="" type="checkbox"/>
295860	WELL	PR	05/04/2010	GW	045-15834	PARACHUTE RANCH FEDERAL 35-33A	PR	<input checked="" type="checkbox"/>
295861	WELL	PR	03/16/2010	GW	045-15835	PARACHUTE RANCH FEDERAL 35-43C	PR	<input checked="" type="checkbox"/>

Inspector Name: CONKLIN, CURTIS

295862	WELL	PR	09/01/2014	GW	045-15836	PARACHUTE RANCH FEDERAL 35-43A	PR	<input checked="" type="checkbox"/>
295863	WELL	PR	03/16/2010	GW	045-15837	PARACHUTE RANCH FEDERAL 35-43B	PR	<input checked="" type="checkbox"/>
295865	WELL	PR	04/23/2010	GW	045-15838	PARACHUTE RANCH FEDERAL 35-42D	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 Motors: _____	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
Access	SATISFACTORY			

Signs/Marker:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK LABELS/PLACARDS	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY

Corrective Date: _____

Comment: **866-580-9382**

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
SEPARATOR	SATISFACTORY	Wire panels		
WELLHEAD	SATISFACTORY	Wire panels		
TANK BATTERY	SATISFACTORY	Wire panels		

Equipment:

Type	#	Satisfactory/Action Required	Comment	Corrective Action	CA Date
Ancillary equipment	1	SATISFACTORY	Chem unit w/ containment		
Bird Protectors	5	SATISFACTORY			
Horizontal Heated Separator	11	SATISFACTORY			

Inspector Name: CONKLIN, CURTIS

Plunger Lift	11	SATISFACTORY			
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Facilities: ☐ New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	6	300 BBLS	STEEL AST	,

S/A/V:	SATISFACTORY	Comment:	
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Corrective Action:		Corrective Date:	
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Paint

Condition	Adequate
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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	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 334376

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/A/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:**S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Wildlife BMPs:****S/A/V:** _____ **Comment:** _____**CA:** _____ **Date:** _____**Stormwater:****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: 295845 Type: WELL API Number: 045-15821 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295854 Type: WELL API Number: 045-15829 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295855 Type: WELL API Number: 045-15830 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295856 Type: WELL API Number: 045-15831 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295857 Type: WELL API Number: 045-15832 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295859 Type: WELL API Number: 045-15833 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295860 Type: WELL API Number: 045-15834 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295861 Type: WELL API Number: 045-15835 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295862 Type: WELL API Number: 045-15836 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295863 Type: WELL API Number: 045-15837 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

Facility ID: 295865 Type: WELL API Number: 045-15838 Status: PR Insp. Status: PR

Producing Well

Comment: PR w/ plunger

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:

Inspector Name: CONKLIN, CURTIS

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1003a. Debris removed? _____ CM _____
CA _____ CA Date _____
Waste Material Onsite? _____ CM _____
CA _____ CA Date _____
Unused or unneeded equipment onsite? _____ CM _____
CA _____ CA Date _____
Pit, cellars, rat holes and other bores closed? _____ CM _____
CA _____ CA Date _____
Guy line anchors removed? _____ 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: _____

Inspector Name: CONKLIN, CURTIS

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
Compaction	Pass	Gravel	Pass			
Seeding	Pass					
Berms	Pass	Compaction	Pass			
Gravel	Pass					

S/A/V: SATISFACTOR
Y

Corrective Date: _____

Comment:

CA:

Pits: ☒ NO SURFACE INDICATION OF PIT