

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:
08/21/2015

Document Number:
674701748

Overall Inspection:

ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection <input type="checkbox"/>	2A Doc Num: _____
	335881	335881	LONGWORTH, MIKE		

Operator Information:

OGCC Operator Number: <u>10456</u>
Name of Operator: <u>CAERUS PICEANCE LLC</u>
Address: <u>600 17TH STREET #1600N</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>

- 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 Engineer
Ellsworth, Stuart		stuart.ellsworth@state.co.us	
Elsener, Garrett		garrett@caerusoilandgas.com	
Janicek, Jake		JJanicek@caerusoilandgas.com	

Compliance Summary:

QtrQtr: SENW Sec: 7 Twp: 6S Range: 96W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/26/2014	663903375			SATISFACTORY			No
04/01/2014	663902914			SATISFACTORY			No
05/29/2013	663801060			SATISFACTORY	I		No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
290068	WELL	PR	12/31/2008	GW	045-13978	CHEVRON 33D-7D	PR	<input checked="" type="checkbox"/>
290069	WELL	PR	12/31/2008	GW	045-13977	CHEVRON 33B-7D	PR	<input checked="" type="checkbox"/>
290070	WELL	PR	12/31/2008	GW	045-13976	CHEVRON 32B-7D	PR	<input checked="" type="checkbox"/>
290071	WELL	PR	03/31/2009	GW	045-13975	CHEVRON 22A-7D	PR	<input checked="" type="checkbox"/>
290072	WELL	PR	10/01/2008	GW	045-13974	CHEVRON 23B-7D	PR	<input checked="" type="checkbox"/>
290073	WELL	PR	12/31/2008	GW	045-13973	CHEVRON 33A-7D	PR	<input checked="" type="checkbox"/>

290074	WELL	PR	12/31/2008	GW	045-13972	CHEVRON 32A-7D	PR	<input checked="" type="checkbox"/>
290075	WELL	PR	12/31/2008	GW	045-13971	CHEVRON 32D-7D	PR	<input checked="" type="checkbox"/>
290076	WELL	SI	11/05/2013	GW	045-13970	CHEVRON 23A-7D	SI	<input checked="" type="checkbox"/>
290077	WELL	PR	10/01/2008	GW	045-13969	CHEVRON 21D-7D	PR	<input checked="" type="checkbox"/>
290078	WELL	PR	12/31/2008	GW	045-13968	CHEVRON 22D-7D	PR	<input checked="" type="checkbox"/>
435758	NONFACILIT Y	CL	01/14/2015		-	Chevron 21D-7D 335881	CL	<input 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

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			
WELLHEAD	SATISFACTORY			
TANK LABELS/PLACARDS	SATISFACTORY			

Emergency Contact Number (S/A/V): SATISFACTORY Corrective Date: _____

Comment: 866-580-9382

Corrective Action: _____

Spills:				
Type	Area	Volume	Corrective action	CA Date
<input type="checkbox"/> Multiple Spills and Releases?				

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
TANK BATTERY	SATISFACTORY			
SEPARATOR	SATISFACTORY			
WELLHEAD	SATISFACTORY			

Equipment:				
Type	#	Satisfactory/Action Required	Comment	CA Date
Horizontal Heated Separator	11	SATISFACTORY		
Bird Protectors	5	SATISFACTORY		

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

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	200 BBLS	STEEL AST	,

S/A/V: SATISFACTORY Comment: **Air id 045-1852-002**

Corrective Action: _____ Corrective Date: _____

Paint

Condition Adequate

Other (Content) _____

Other (Capacity) _____

Other (Type) _____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal				

Corrective Action _____ Corrective Date _____

Comment _____

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CONDENSATE	1	400 BBLS	STEEL AST	,

S/A/V: SATISFACTORY Comment: **Air id 045-1852-001**

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	Comment
NO	

Flaring:

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

Predrill

Location ID: 335881

Site Preparation:

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

S/AV: _____

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

Form 2A COAs:

S/AV: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AV: _____ **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: 290068 Type: WELL API Number: 045-13978 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290069 Type: WELL API Number: 045-13977 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290070 Type: WELL API Number: 045-13976 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290071 Type: WELL API Number: 045-13975 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290072 Type: WELL API Number: 045-13974 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290073 Type: WELL API Number: 045-13973 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290074 Type: WELL API Number: 045-13972 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290075 Type: WELL API Number: 045-13971 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290076 Type: WELL API Number: 045-13970 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

S/A/V: ALLEGED

CA Date: 09/22/2015

CA: Well must be either:
 1) Per COGCC Rule 326.b.(1) a successful mechanical integrity test shall be performed on each shut-in well within two (2) years of the initial shut-in date or
 2) Be properly plugged and abandoned . Shut-in and temporarily abandoned wells must be properly reported on COGCC Form 7, Operator's Monthly Production Report.

Comment: Well shut in since June 2013

Facility ID: 290077 Type: WELL API Number: 045-13969 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

Facility ID: 290078 Type: WELL API Number: 045-13968 Status: PR Insp. Status: PR

Producing Well

Comment: Producing well

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: _____ Lat _____ Long _____
DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters: _____

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? Pass CM _____ CA _____ CA Date _____
Waste Material Onsite? Pass CM _____ CA _____ CA Date _____
Unused or unneeded equipment onsite? Pass 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 _____

Inspector Name: LONGWORTH, MIKE

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
		Culverts	Pass			
Compaction	Pass					
		Ditches	Pass			
		Check Dams	Pass			
		Gravel	Pass			
		Compaction	Pass			
Berms	Pass					
Seeding	Pass					
Gravel	Pass					

S/A/V: SATISFACTOR

Corrective Date: _____

Y _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

ACTION REQUIRED

ANY ACTION REQUIRED items listed on this report indicate that the oil and gas facility or the oil and gas operations listed on the report may be in violation of the rules and regulations of the Colorado Oil and Conservation Commission (“COGCC”) and corrective action is required.

There is reasonable cause to believe that a violation of the Oil and Gas Conservation Act, or of any rule, regulation, or order of the Commission, or of any permit issued by the Commission, has occurred. The Operator’s compliance with this Inspection Report is required to resolve these alleged violations. This document requires the Operator to timely respond to the COGCC and to comply with directives as listed by the **Corrective Action Deadline Date**. Failure to do so will result in the issuance of a Notice of Alleged Violation and initiation of enforcement proceedings in which COGCC will seek monetary penalties for the alleged violations pursuant to § 34-60-121, C.R.S. and Rule 523, COGCC Rules of Practice and Procedure, 2 CCR 404-1. (Please note that the COGCC's penalty authority was recently increased to a maximum of \$15,000 per day and penalties are no longer capped at a maximum of \$10,000 per violation.)