

Inspector Name: Sherman, Susan

**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:

12/30/2015

Document Number:

673712295

Overall Inspection:

SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	258295	304325	Sherman, Susan	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number: 86610

Name of Operator: CAERUS WASHCO LLC

Address: 600 17TH STREET - STE #1600N

City: 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
Sprague, Chuck	(970) 630-0214	csprague@caerusoilandgas.com	
McKee, Mike	(303) 565-4600	mmckee@caerusoilandgas.com	

Compliance Summary:

QtrQtr: SWNW Sec: 26 Twp: 1N Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/18/2015	673711297	IJ	SI	SATISFACTORY			No
05/16/2014	673703207	IJ	AC	SATISFACTORY	P		No
01/28/2013	664000743	IJ	IJ	SATISFACTORY			No
07/17/2012	663300314	IJ	IJ	SATISFACTORY	I		No
07/08/2011	200315172	RT	AC	SATISFACTORY			No
06/09/2010	200255025	RT	AC	SATISFACTORY			No
12/15/2009	200225644	RT	AC	SATISFACTORY			No
11/20/2009	200222494	RT	AC	ACTION REQUIRED			Yes
07/09/2009	200214581	RT	AC	SATISFACTORY			No
04/18/2008	200130513	RT	AC	SATISFACTORY			No
01/17/2008	200124945	MI	AC	SATISFACTORY			No
03/06/2007	200106613	RT	AC	SATISFACTORY		Pass	No
05/23/2006	200090397	MI	AC	SATISFACTORY		Pass	No
05/02/2005	200070518	RT	AC	SATISFACTORY		Pass	No
04/19/2004	200053139	RT	AC	SATISFACTORY		Pass	No
08/13/2003	200042469	RT	AC	SATISFACTORY		Pass	No
06/18/2002	200027923	RT	AC	SATISFACTORY		Pass	No
09/05/2001	200019898	RT	WO	ACTION REQUIRED		Fail	No

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
159049	UIC DISPOSAL	AC	10/31/2001		-	GARDNER 12-26 SWD	AC	<input type="checkbox"/>
258295	WELL	IJ	02/06/2014	DSPW	125-08247	GARDNER (SWD) 12-26	AC	<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
CONTAINERS	SATISFACTORY	concrete vault labeled (verify wildlife netting is over gaps in vault cover-see attached photo)		
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
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☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

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Equipment:				
Type:	#	Satisfactory/Action Required:		
Comment				
Corrective Action			Date:	

Venting:	
Yes/No	
Comment	

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

Predrill

Location ID: 258295

Site Preparation:

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:

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Summary of Operator Response to Landowner Issues:

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Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

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Facility

Facility ID: 258295 Type: WELL API Number: 125-08247 Status: IJ Insp. Status: AC

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):

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. Waste and Debris removed?

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 marked?

CM
CA CA Date

1003b. Area no longer in use? Production areas stabilized ?

1003c. Compacted areas have been cross ripped?

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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
Compaction	Pass					
Gravel	Pass					

S/A/V: SATISFACTOR _____ Corrective Date: _____
Y _____

Comment: _____

CA: _____

Pits: ☐ NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
Corrective action from inspection #673703207 completed.	ShermaSe	12/31/2015

Attached Documents

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

Document Num	Description	URL
673712313	Caerus Gardner SWD 12-26	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3751209