

**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:

01/11/2017

Submitted Date:

01/11/2017

Document Number:

674703513**FIELD INSPECTION FORM**
 Loc ID 335814 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:4 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
265355	WELL	PR	07/23/2013	GW	045-08989	CHEVRON 42-5D	PR
281978	WELL	PR	08/31/2009	GW	045-11607	CHEVRON 2F-4D	PR
281979	WELL	PR	03/01/2006	GW	045-11606	CHEVRON 12-4	PR

General Comment:

LocationOverall Good: ☒

Signs/Marker:			
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 800-580-9382

Corrective Action:

Date: _____

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Bird Protectors	# 3		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 3		
Comment:			
Corrective Action:		Date:	
Type: Plunger Lift	# 3		

Comment:			
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	1	400 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:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected FacilitiesFacility ID: 265355 Type: WELL API Number: 045-08989 Status: PR Insp. Status: PR**Producing Well**Comment: Producing well

Corrective Action:

Date:

Facility ID: 281978 Type: WELL API Number: 045-11607 Status: PR Insp. Status: PR**Producing Well**Comment: Producing well

Corrective Action:

Date:

Facility ID: 281979 Type: WELL API Number: 045-11606 Status: PR Insp. Status: PR**Producing Well**Comment: Producing well

Corrective Action:

Date: