

**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:

02/21/2017

Submitted Date:

02/21/2017

Document Number:

674703639**FIELD INSPECTION FORM**
 Loc ID 324087 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:**3 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
McKee, Michael		MMckee@caerusoilandgas.com	
Elsener, Garrett		garrett@caerusoilandgas.com	
Janicek, Jake		JJanicek@caerusoilandgas.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
256593	WELL	PR	12/22/1999	GW	045-07469	NOLTE 14-43D	PR

**General Comment:**

**Location**Overall Good: ☒

<b>Signs/Marker:</b>			
Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:	Caerus sticker peeling off of battery sign.		
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 866-580-9382

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

<b>Spills:</b>			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

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

<b>Equipment:</b>			corrective date
Type: Plunger Lift	# 1		
Comment:			
Corrective Action:		Date:	
Type: Bird Protectors	# 2		
Comment:			
Corrective Action:		Date:	
Type: Horizontal Heated Separator	# 1		

Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 2		
Comment:			
Corrective Action:		Date:	
Type: Dehydrator	# 1		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS	
CONDENSATE	1	100 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 Facilities**Facility ID: 256593 Type: WELL API Number: 045-07469 Status: PR Insp. Status: PR**Producing Well**Comment: [Producing well](#)

Corrective Action:

Date:

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

Document Num	Description	URL
401215977	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080859">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4080859</a>