

**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:

05/09/2018

Submitted Date:

05/09/2018

Document Number:

689701337**FIELD INSPECTION FORM**Loc ID 335676 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:2 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
, Caerus Piceance		COGCC.inspections@caerus oilandgas.com	Piceance inspections only

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
452674	WELL	DG	01/29/2018		045-23775	NPR 23B-10-596	DG

General Comment:

LocationOverall Good: ☒**Signs/Marker:**

Type	DRILLING/RECOMP		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 452674 CDP: _____

Comment: _____

Corrective Action: _____ Date: _____

Form 2A COAs:

Comment: _____

Corrective Action: _____ Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____ Date: _____

Comment: _____

Corrective Action: _____ Date: _____

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:

Inspected FacilitiesFacility ID: 452674 Type: WELL API Number: 045-23775 Status: DG Insp. Status: DG**Well Drilling**

Rig: Rig Name: H&P 273 Pusher/Rig Manager: Boyd Cottom
Permit Posted: Yes Access Sign: Yes

Well Control Equipment:

Pipe Ram: YES Blind Ram: YES Hydri Type: YES
Pressure Test BOP: Pass Test Pressure PSI: 3000 Safety Plan: YES

Drill Fluids**Management:**

Lined Pit: _____ Unlined Pit: _____ Closed Loop: YES Semi-Closed Loop: _____
Multi-Well: YES Disposal Location: _____

Comment: Current depth 5725' BJ Services loading cement bins during inspection.

Corrective Action: _____ Date: _____

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Berms	Pass					
				Material Handling And Spill Prevention	Pass	
		Gravel	Pass			
		Compaction	Pass			
		Culverts	Pass			
Ditches	Pass					
Compaction	Pass					
		Ditches	Pass			
				Material Handling And Spill Prevention	Pass	

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
689701338	Inspection 689701337 photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4458612