

**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:

07/06/2020

Submitted Date:

07/06/2020

Document Number:

700701029**FIELD INSPECTION FORM**Loc ID 334800 Inspector Name: Ramsey, Scott 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:**5 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM  
PREVIOUS INSPECTIONS THAT HAVE NOT  
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

| Contact Name | Phone | Email                                     | Comment |
|--------------|-------|---|---------|
| , Caerus     |       | COGCC.inspections@caerus<br>oilandgas.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name        | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------------|-------------|
| 211584      | WELL | PR     | 10/01/2003  | GW         | 045-07345 | WAGSTROM 8-13 (M8E)  | PR          |
| 258224      | WELL | PR     | 12/09/2000  | GW         | 045-07621 | WAGSTROM 8-13A (M8E) | PR          |

**General Comment:****COGCC Inspection Report Summary**

On Monday 7/6/20 at approximately 9:30 AM, I, Inspector Scott Ramsey, conducted a routine inspection at Caerus M8E, at Location # 334800 in Garfield county Colorado.

While there, I observed normal production operations. All meters have been calibrated on location within the past year.

This is a summary of inspection report.

**Location****Lease Road:**

|                   |        |       |  |
|-------------------|--------|-------|--|
| Type              | Access |       |  |
| comment:          |        |       |  |
| Corrective Action | L      | Date: |  |

Overall 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:           | 911 |       |  |
| Corrective Action: |     | Date: |  |

**Good Housekeeping:**

|                    |        |       |  |
|--------------------|--------|-------|--|
| Type               | DEBRIS |       |  |
| Comment:           |        |       |  |
| Corrective Action: |        | Date: |  |

Overall Good: ☒**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

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

|                          |  |       |                 |
|--------------------------|--|-------|-----------------|
| Type: Bird Protectors    | # 2  |       | corrective date |
| Comment:                 |  |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Gas Meter Run      | # 2  |       |                 |
| Comment:                 | All meters calibrated on location within a year. |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Deadman # & Marked | # 5  |       |                 |
| Comment:                 |  |       |                 |
| Corrective Action:       |  | Date: |                 |

|                                   |     |  |       |
|-----------------------------------|-----|--|-------|
| Type: Horizontal Heated Separator | # 2 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |
| Type: Plunger Lift                | # 2 |  |       |
| Comment:                          |     |  |       |
| Corrective Action:                |     |  | Date: |

**Tanks and Berms:**

| Contents           | # | Capacity | Type      | Tank ID | SE GPS |       |
|--------------------|---|----------|-----------|---------|--------|-------|
| CONDENSATE         | 1 | 300 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: 211584 Type: WELL API Number: 045-07345 Status: PR Insp. Status: PR**Producing Well**Comment: producing

Corrective Action:

Date:

Facility ID: 258224 Type: WELL API Number: 045-07621 Status: PR Insp. Status: PR**Producing Well**Comment: producing

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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Ditches          |                 | Ditches                 |                       |               |                          |         |
| Gravel           |                 | Gravel                  |                       |               |                          |         |
|                  |                 | Culverts                |                       |               |                          |         |

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   |
|--------------|----------------|---|
| 700701035    | Photos for M8E | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5190940">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5190940</a> |