

FORM
INSPRev
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State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

07/06/2020

Submitted Date:

07/06/2020

Document Number:

700701033

FIELD INSPECTION FORM

Loc ID 335000 Inspector Name: Ramsey, Scott On-Site Inspection 2A Doc Num: _____

Operator Information:

OGCC Operator Number: 10456
Name of Operator: CAERUS PICEANCE LLC
Address: 1001 17TH STREET #1600
City: DENVER State: CO Zip: 80202

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
 FOLLOW UP INSPECTION REQUIRED
 NO FOLLOW UP INSPECTION REQUIRED

Findings:

6 Number of Comments
0 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 oilandgas.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 269180 | WELL | PR | 06/11/2004 | GW | 045-09325 | HILL 9-9 (J9E) | PR |
| 269185 | WELL | TA | 06/29/2011 | SI | 045-09327 | HILL 9-15A (J9E) | TA |
| 269186 | WELL | PR | 04/01/2018 | GW | 045-09326 | HILL 9-9B (J9E) | PR |

General Comment:

[COGCC Inspection Report Summary](#)
On Monday 7/6/20 at approximately 1:30 PM, I, Inspector Scott Ramsey, conducted a routine inspection at Caerus J9E, at Location # 335000 in Garfield county Colorado.
While there, I observed normal production operations. All meters have been calibrated on location within the past year. All C/A(s) from previous inspection document #694900655 have been completed.
This is a summary of inspection report.

| Location | | | |
|--|----------------------|--------|-------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | | | |
| Corrective Action: | | Date: | |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | BATTERY | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Emergency Contact Number: | | | |
| Comment: | 911 | | |
| Corrective Action: | | | Date: _____ |
| Good Housekeeping: | | | |
| Type | DEBRIS | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | SEPARATOR | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type | TANK BATTERY | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

| | | | |
|---------------------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Plunger Lift | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 3 | | |
| Comment: | All meters calibrated on location within a year. | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Vertical Heated Separator | # 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 Facilities

Facility ID: 269180 Type: WELL API Number: 045-09325 Status: PR Insp. Status: PR

Producing Well

Comment: producing

Corrective Action:

Date:

Facility ID: 269185 Type: WELL API Number: 045-09327 Status: TA Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned

Reminder: _____

Comment: last MIT was done 6/15/16

Corrective Action:

Date: _____

Facility ID: 269186 Type: WELL API Number: 045-09326 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Gravel | | | | |
| Berms | | Culverts | | | | |
| Gravel | | Ditches | | | | |

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 |
|--------------|----------------|---|
| 700701039 | Photos for J8E | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5190944 |