

**FORM
INSP**Rev
X/20**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:

03/02/2022

Submitted Date:

03/03/2022

Document Number:

700703939

FIELD INSPECTION FORM

| | | | | |
|--|----------------------------------|---|-------------------|---|
| Loc ID 323976 | Inspector Name: Ramsey, Scott | On-Site Inspection <input type="checkbox"/> | 2A Doc Num: _____ | Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input checked="" type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED Findings: 8 Number of Comments 2 Number of Corrective Actions <input checked="" type="checkbox"/> Corrective Action Response Requested |
| Operator Information: OGCC Operator Number: 10456 Name of Operator: CAERUS PICEANCE LLC Address: 1001 17TH STREET #1600 City: DENVER State: CO Zip: 80202 | | | | 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 |
| 211389 | WELL | SI | 12/01/2021 | GW | 045-07149 | DUNN 4-15 (O4E) | SI |

General Comment:

COGCC Inspection Report Summary
 On Wednesday 3/2/2022 at approximately 1100, I, Inspector Scott Ramsey, conducted a routine inspection at Caerus O4E, at Location # 323976 in Garfield county Colorado.
 Any Corrective Actions from previous Inspections that have not been addressed are still applicable.
 While there, I observed normal production operations. All meters have been calibrated on location within the past year. This location is within or in close proximity to a CPW Density/High Priority Habitat, black bear, NSO habitat, Wildlife Management Area. Operator (Caerus) has provided documentation of their Best Management Practices for Sediment Tracking Controls.

During this inspection the following compliance issues were observed:

1. Lack of battery signage.
2. Lack of stabilization in areas of access road.

Refer to photograph of observed compliance issue.

A follow up on this site inspection will be conducted to ensure the compliance issues have been corrected to comply with COGCC rules. This is a summary of inspection report.

Location

| | | | |
|--------------------|----------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | See stormwater | | |
| Corrective Action | L | Date: | |

Overall Good: ☐

| | | | |
|----------------------|--|-------|------------|
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | Lack of battery signage. | | |
| Corrective Action: | Provide proper signage | Date: | 05/20/2022 |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type | OTHER | | |
| Comment: | Separator units include attached storage tanks. The sight glass located on the side of the unit indicates the storage tank is full of an unknown fluid. No form of labeling or markers are present to identify a potential hazard or the contents of the storage tank. | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| 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: | | | corrective date |
| Type: Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Plunger Lift | # 1 | | |
| Comment: | | | |

| | | | |
|-----------------------------------|---|-------|--|
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | 500 gallon methanol tank in metal containment | | |
| Corrective Action: | | Date: | |
| Type: Horizontal Heated Separator | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bradenhead | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|--------|
| CONDENSATE | 1 | 500 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: | 211389 | Type: | WELL | API Number: | 045-07149 | Status: | SI | Insp. Status: | SI |
| Idle Well | | | | | | | | | |
| Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: _____ | | | | | | | | | |
| Comment: <input type="text" value="Last produced 11/2021"/> | | | | | | | | | |
| Corrective Action: <input type="text"/> 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | Compaction | Fail | | | |

Comment: 1. Lack of stabilization in areas of access road.

Corrective Action: Install or repair required BMPs

Date: 04/15/2022

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 |
|--------------|-------------|---|
| 700703946 | Photo log | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5680961 |