

**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:

05/10/2019

Submitted Date:

05/10/2019

Document Number:

692601793**FIELD INSPECTION FORM**

Loc ID      Inspector Name:      On-Site Inspection ☐  
 438137      Welsh, Brian      2A Doc Num: \_\_\_\_\_

**Operator Information:**OGCC Operator Number: 10699Name of Operator: OWN RESOURCES OPERATING LLCAddress: 38 PALMER CREST CTCity: SPRING      State: TX      Zip: 77381**Status Summary:**

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

**Findings:**9 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 |
|--------------|----------------|-----------------------------|---------|
| Jones, Greg  | (970) 630-3909 | greg.jones@ownresources.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name    | Insp Status |
|-------------|------|--------|-------------|------------|-----------|------------------|-------------|
| 438134      | WELL | PR     | 08/05/2014  | GW         | 125-12091 | Hays 14-35 1S44W | PR          |

**General Comment:**Routine Inspection

**Location**

|                    |                           |       |  |
|--------------------|---------------------------|-------|--|
| <b>Lease Road:</b> |                           |       |  |
| Type               | Access                    |       |  |
| comment:           | Two track through pasture |       |  |
| Corrective Action  | L                         | Date: |  |

Overall Good: ☒

|                      |                    |       |  |
|----------------------|--------------------|-------|--|
| <b>Signs/Marker:</b> |                    |       |  |
| Type                 | WELLHEAD           |       |  |
| Comment:             | Lease sign by unit |       |  |
| Corrective Action:   |                    | Date: |  |

Emergency Contact Number:

Comment:

Corrective Action:

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

Overall Good: ☒

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

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                    |                                       |       |  |
|--------------------|---------------------------------------|-------|--|
| <b>Fencing/:</b>   |                                       |       |  |
| Type               | LOCATION                              |       |  |
| Comment:           | Wire fence around entire location     |       |  |
| Corrective Action: |                                       | Date: |  |
| Type               | PUMP JACK                             |       |  |
| Comment:           | Metal panels around unit and wellhead |       |  |
| Corrective Action: |                                       | Date: |  |

|                           |                |       |                 |
|---------------------------|----------------|-------|-----------------|
| <b>Equipment:</b>         |                |       | corrective date |
| Type: Deadman # & Marked  | # 4            |       |                 |
| Comment:                  |                |       |                 |
| Corrective Action:        |                | Date: |                 |
| Type: Ancillary equipment | # 1            |       |                 |
| Comment:                  | Electric panel |       |                 |
| Corrective Action:        |                | Date: |                 |
| Type: Prime Mover         | # 1            |       |                 |
| Comment:                  | Electric motor |       |                 |
| Corrective Action:        |                | Date: |                 |
| Type: Pump Jack           | # 1            |       |                 |
| Comment:                  | Jensen unit    |       |                 |
| Corrective Action:        |                | Date: |                 |

|                    |    |  |       |
|--------------------|----|--|-------|
| <b>Venting:</b>    |    |  |       |
| Yes/No             | NO |  |       |
| Comment:           |    |  |       |
| Corrective Action: |    |  | Date: |

|                    |  |  |       |
|--------------------|--|--|-------|
| <b>Flaring:</b>    |  |  |       |
| Type               |  |  |       |
| Comment:           |  |  |       |
| Corrective Action: |  |  | Date: |

| Inspected Facilities |   |       |      |             |           |         |    |               |    |
|----------------------|---|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 438134  | Type: | WELL | API Number: | 125-12091 | Status: | PR | Insp. Status: | PR |
| Producing Well       |   |       |      |             |           |         |    |               |    |
| Comment:             | Producing. Casing production. Central meter run for (Cantrall 2-4, 35-04, 35-06, 35-12, 35-14, 34-9, 34-16) 4935' N @ 39.93401/-102.27943 |       |      |             |           |         |    |               |    |
| 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           | Pass            | Compaction              | Pass                  |               |                          |         |

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT