

**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:

08/29/2019

Submitted Date:

08/29/2019

Document Number:

692602456

**FIELD INSPECTION FORM**

Loc ID 310944 Inspector Name: Welsh, Brian On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

OGCC Operator Number: 10699  
Name of Operator: OWN RESOURCES OPERATING LLC  
Address: 38 PALMER CREST CT  
City: SPRING State: TX Zip: 77381

**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
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
297013	WELL	PR	10/18/2008	GW	125-11337	MCDONALD 31-22 2S46W	PR

**General Comment:**

[Routine Inspection](#)

**Location**

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

Overall Good:

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

<b>Emergency Contact Number:</b>			
Comment:	<input style="width: 95%;" type="text"/>		
Corrective Action:	<input style="width: 95%;" type="text"/>		Date: _____

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

<b>Fencing/:</b>			
Type	WELLHEAD		
Comment:	Metal panels around wellhead, VGS and meter shed		
Corrective Action:		Date:	

<b>Equipment:</b>			corrective date
Type: Vertical Separator	# 1		
Comment:	Vertical gas separator 50% buried by meter shed		
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:			
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: 297013 Type: WELL API Number: 125-11337 Status: PR Insp. Status: PR

**Producing Well**

Comment: [Producing. Casing production](#)

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
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT