

**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:

08/19/2020

Submitted Date:

08/20/2020

Document Number:

699601616

**FIELD INSPECTION FORM**

Loc ID: 304290 Inspector Name: SCHURE, KYM 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:**

- 11 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                     |
|--------------|-------|------------------------------|-----------------------------|
| Dolezal, Pat |       | pat.dolezal@ownresources.com | <a href="#">Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 256307      | WELL | PR     | 12/16/2000  | GW         | 125-08198 | LETT 14-28    | PR          |

**General Comment:**

[Routine Site Inspection FIR - Satisfactory](#)

| Location   |                                    |        |                 |
|--|------------------------------------|--------|-----------------|
| <b>Lease Road:</b>                                     |                                    |        |                 |
| Type   | Access                             |        |                 |
| comment:   | Two track grassland                |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| Overall Good: <input type="checkbox"/>                 |                                    |        |                 |
| <b>Signs/Marker:</b>                                   |                                    |        |                 |
| Type   | WELLHEAD                           |        |                 |
| Comment:   | Satisfactory                       |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| <b>Emergency Contact Number:</b>                       |                                    |        |                 |
| Comment:   | Satisfactory                       |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| Overall Good: <input checked="" type="checkbox"/>      |                                    |        |                 |
| <b>Spills:</b>   |                                    |        |                 |
| Type   | Area                               | Volume |                 |
| In Containment: No                                     |                                    |        |                 |
| Comment:   | NA                                 |        |                 |
| <input type="checkbox"/> Multiple Spills and Releases? |                                    |        |                 |
| <b>Fencing/:</b>                                       |                                    |        |                 |
| Type   | PUMP JACK                          |        |                 |
| Comment:   | Steel panels                       |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| <b>Equipment:</b>                                      |                                    |        |                 |
| Type: Gas Meter Run                                    | # 1                                |        | corrective date |
| Comment:   | Calibration Cert. in place         |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| Type: Other  | # 0                                |        |                 |
| Comment:   | No change in equipment inventoried |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| <b>Venting:</b>  |                                    |        |                 |
| Yes/No   |                                    |        |                 |
| Comment:   |                                    |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |
| <b>Flaring:</b>  |                                    |        |                 |
| Type   |                                    |        |                 |
| Comment:   |                                    |        |                 |
| Corrective Action:                                     |                                    | Date:  |                 |

**Inspected Facilities**

Facility ID: 256307 Type: WELL API Number: 125-08198 Status: PR Insp. Status: PR

**Producing Well**

Comment: [GW](#)

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           | In Process      | Other                   | In Process            |               |                          |         |

Comment:

Corrective Action:

Date:

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

| Comment                     | User     | Date       |
|-----------------------------|----------|------------|
| <a href="#">Routine FIR</a> | schureky | 08/20/2020 |

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

| Document Num | Description                      | URL   |
|--------------|----------------------------------|---|
| 699601633    | Signage-PJ-GMR-Calibration Cert. | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5228722">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5228722</a> |