

**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:

11/12/2020

Submitted Date:

11/13/2020

Document Number:

699602031

FIELD INSPECTION FORM

Loc ID 303921 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:

12 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 | Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 253798 | WELL | PR | 03/22/1995 | GW | 125-07676 | FRANSON 9-33 | PR |

General Comment:

[Routine FIR](#)

| Location | | | |
|--|--------------------------------|--------|-----------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Cropland with seasonal tillage | | |
| Corrective Action: | | | Date: |
| Overall Good: <input type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | BATTERY | | |
| Comment: | MR | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: |
| Emergency Contact Number: | | | |
| Comment: | Satisfactory | | |
| Corrective Action: | | | Date: _____ |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | NA | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | PUMP JACK | | |
| Comment: | Steel panel | | |
| Corrective Action: | | | Date: |
| Equipment: | | | |
| Type: | Gas Meter Run | # 1 | corrective date |
| Comment: | Calibration cert in place | | |
| Corrective Action: | | | Date: |
| Venting: | | | |
| Yes/No | NO | | |
| Comment: | NA | | |
| Corrective Action: | | | Date: |
| Flaring: | | | |
| Type | | | |
| Comment: | NA | | |
| Corrective Action: | | | Date: |

Inspected Facilities

Facility ID: 253798 Type: WELL API Number: 125-07676 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