

FORM  
INSPRev  
X/20State of Colorado  
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

11/17/2021

Submitted Date:

11/29/2021

Document Number:

701600493

## FIELD INSPECTION FORM

 Loc ID 303964 Inspector Name: SCHURE, KYM On-Site Inspection  2A Doc Num: \_\_\_\_\_
**Operator Information:**
 OGCC Operator Number: 10112  
 Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC  
 Address: 5057 KELLER SPRINGS RD STE 650  
 City: ADDISON State: TX Zip: 75001
**Status Summary:**

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

**Findings:**

8 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
Eisterhold, Racheal		regulatory@foundationenergy.com	<a href="#">N.E. Colo. inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
253851	WELL	PR	08/04/1995	GW	125-07729	STATE 16-33	PR

**General Comment:**

Routine FIR - SATISFACTORY

Location			
<b>Lease Road:</b>			
Type	Access		
comment:	Two track - perimeter of irrigated circle		
Corrective ActionL		Date:	
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:	SATISFACTORY		Date: _____
Corrective Action:			
Overall Good: <input checked="" type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:	NONE		
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Equipment:</b>			
Type: Other	# 0		corrective date
Comment:	No change in equipment inventoried		
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: 253851 Type: WELL API Number: 125-07729 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