

**FORM
INSP**Rev
X/20**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:

11/01/2022

Submitted Date:

11/11/2022

Document Number:

688313326**FIELD INSPECTION FORM**Loc ID 304312 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: **Operator Information:**OGCC Operator Number: 10699Name of Operator: OWN RESOURCES OPERATING LLCAddress: 305 S RIDGE STREET #6279City: BRECKENRIDGE State: CO Zip: 80424**Status Summary:**

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

Findings:6 Number of Comments1 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
Sharp, Kelly		kelly.sharp@ownresources.com	
Dolezal, Pat	970-332-3585	pat.dolezal@ownresources.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
257030	WELL	PR	12/16/2000	GW	125-08230	VONDERWAHL 4-2	PR

General Comment:

Routine Field Inspection

Last Bradenhead test:

402884863 17 -00 Test Date: 11/23/2021

Init Surf Casing Pressure: 0

End Surf Casing Pressure: 0

Samples Taken: N; Gas - N, Liquid - N APPROVED 12/2/2021 12/2/2021 OWN RESOURCES OPERATING LLC

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment: 970-332-3585

Corrective Action:

Date: _____

Overall Good: ☐

Spills:				
Type	Area	Volume		

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Vertical Separator	# 2		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment: electric motor			
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 2		

Inspector Name: Sherman, Susan

Comment:	chart, shed, no 2022 calibration card		
Corrective Action:	Calibrate gas metering equipment annually to comply with rule 430.d.(1).	Date:	12/15/2022
Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	257030	Type:	WELL	API Number:	125-08230	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	pr 9/1/2022 production is reported to COGCC database								
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**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
688313373	OWN Resources Vonderwahl 4-2	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5913309