

**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:

05/03/2023

Submitted Date:

05/04/2023

Document Number:

701603226

FIELD INSPECTION FORMLoc ID 311880 Inspector Name: SCHURE, KYM On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10699

Name of Operator: OWN RESOURCES OPERATING LLC

Address: 305 S RIDGE STREET #6279

City: BRECKENRIDGE State: CO Zip: 80424

Status Summary:

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

Findings:

9 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
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
159231	UIC DISPOSAL	AC	06/09/2008		-	BROPHY WDW 42-13 4N46W	AC
295063	WELL	IJ	02/13/2019	DSPW	125-11177	BROPHY WDW 42-13 4N46W	IJ

General Comment:

UIC-MIT 2023 SATISFACTORY

FORM 42 RECEIVED
FORM 21 ATTACHED

Location

Lease Road:			
Type	Access		
comment:	GRAVEL OFF GRAVEL COUNTY ROAD 52		
Corrective Action:		Date:	

Overall Good: ☐

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

Emergency Contact Number:			
Comment:	SATISFACTORY		
Corrective Action:		Date:	

Overall Good: ☒

Spills:					
Type	Area	Volume			

In Containment: No

Comment: NONE

☐ Multiple Spills and Releases?

Equipment:			corrective date
Type: Other	# 0		
Comment:	NO CHANGE		
Corrective Action:		Date:	

Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected FacilitiesFacility ID: 159231 Type: UIC API Number: - Status: AC Insp. Status: AC**Underground Injection Control**UIC Violation: _____ Maximum Injection Pressure: 648UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
(e.g. 30 psig or -30" Hg) Inj Zone: _____

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: _____

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 0 Csg psi: 600 BH psi: _____Insp. Status: PassComment: WELL HELD (600)PSI THROUGHOUT DURATION OF (15) MIN. TEST FORM 21 ATTACHED

Corrective Action: _____ Date: _____

Facility ID: 295063 Type: WELL API Number: 125-11177 Status: IJ Insp. Status: IJ

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	Gravel	In Process			

Comment: [CONTINUE BMP'S FOR EROSION MANAGEMENT](#)

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
UIC-MIT 2023 SATISFACTORY	schureky	05/04/2023

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

Document Num	Description	URL
701603260	FORM 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6104273