

**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:

07/17/2023

Submitted Date:

07/17/2023

Document Number:

695108438**FIELD INSPECTION FORM**Loc ID 307459 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10705Name of Operator: EVERGREEN NATURAL RESOURCES LLCAddress: 1875 LAWRENCE ST STE 1150City: DENVER State: CO Zip: 80202**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                         |
|-------------------------|--------------|----------------------------|---------------------------------|
| Distribution, Evergreen | 719-846-7898 | cogcc.evergreen@enrllc.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 217692      | WELL | SI     | 12/01/2021  | CBM        | 071-06471 | JOE 11-29     | SI          |

**General Comment:**

**Location**Overall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

Date: \_\_\_\_\_

**Good Housekeeping:**

|                    |  |  |                  |
|--------------------|--|--|------------------|
| Type               | UNUSED EQUIPMENT   |  |                  |
| Comment:           | PHOTO 3: WELLHEAD AND EQUIPMENT/ UNMARKED UNUSED RISER.              |  |                  |
| Corrective Action: | REMOVE OR MARK UNUSED RISER WITH LABEL STATING ITS USE PER RULE 606. |  | Date: 08/17/2023 |

Overall Good: ☐**Spills:**

|      |      |        |  |  |
|------|------|--------|--|--|
| Type | Area | Volume |  |  |
|------|------|--------|--|--|

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

|                           |   |       |                 |
|---------------------------|---|-------|-----------------|
| Type: Gas Meter Run       | # 1   |       | corrective date |
| Comment:                  | CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR. |       |                 |
| Corrective Action:        |   | Date: |                 |
| Type: Vertical Separator  | # 1   |       |                 |
| Comment:                  |   |       |                 |
| Corrective Action:        |   | Date: |                 |
| Type: Progressive Cavity  | # 1   |       |                 |
| Comment:                  |   |       |                 |
| Corrective Action:        |   | Date: |                 |
| Type: Ancillary equipment | # 1   |       |                 |
| Comment:                  |   |       |                 |
| Corrective Action:        |   | Date: |                 |
| Type: Deadman # & Marked  | # 4   |       |                 |
| Comment:                  |   |       |                 |
| Corrective Action:        |   | Date: |                 |
| Type: Bradenhead          | # 1   |       |                 |
| Comment:                  | IS ACCESSABLE   |       |                 |
| Corrective Action:        |   | Date: |                 |

**Venting:**

|          |    |  |  |
|----------|----|--|--|
| Yes/No   | NO |  |  |
| Comment: |    |  |  |

|                    |  |       |  |
|--------------------|--|-------|--|
| Corrective Action: |  | Date: |  |
| <b>Flaring:</b>    |  |       |  |
| Type               |  |       |  |
| Comment:           |  |       |  |
| Corrective Action: |  | Date: |  |

**Inspected Facilities**Facility ID: 217692 Type: WELL API Number: 071-06471 Status: SI Insp. Status: SI**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned

Reminder: \_\_\_\_\_

Comment: WELL LAST PRODUCE NOV. 2021.

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_

**BradenHead**Date of Last Brhd Test: 07/10/2009

Annual Brhd Completed? \_\_\_\_\_

Last Brhd Test Results Initial Surf Csg Pressure: 0

Fluid Type: \_\_\_\_\_

End Surf Csg Pressure: --Comment: FORM 4 IS ON FILE

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                  |               |                          |         |
| Gravel           | Pass            | Gravel                  | 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   |
|--------------|--------------|---|
| 695108439    | INSP. PHOTOS | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6184762">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6184762</a> |