

**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:

12/05/2023

Submitted Date:

12/05/2023

Document Number:

695108823**FIELD INSPECTION FORM**Loc ID 333373 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10758Name of Operator: OGRIS OPERATING LLCAddress: PO BOX 53467City: MIDLAND State: TX Zip: 79710**Status Summary:**

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

**Findings:**4 Number of Comments0 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
WARD, GIENA		gward@ogrisop.com	<a href="#">All Inspections</a>
BACA, DAVE	719-859-4066	dbaca@ogrisop.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
284812	WELL	PR	01/24/2007	CBM	071-08803	GOLDEN EAGLE 20-9	PR
444509	SPILL OR RELEASE	CL	01/11/2016		-	SPILL/RELEASE POINT	CL

**General Comment:**

**Location**Overall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

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

Overall Good: ☒**Spills:**

Type

Area

Volume

In Containment: No

Comment:

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

corrective date

Type: Deadman # &amp; Marked

# 4

Comment:

Corrective Action:

Date:

Type: Progressive Cavity

# 1

Comment:

Corrective Action:

Date:

Type: Bradenhead

# 1

Comment: IS ACCESSABLE

Corrective Action:

Date:

Type: Vertical Separator

# 1

Comment:

Corrective Action:

Date:

Type: Gas Meter Run

# 1

Comment: CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR.

Corrective Action:

Date:

Type: Prime Mover

# 1

Comment:

Corrective Action:

Date:

Type: Ancillary equipment

# 1

Comment:

Corrective Action:

Date:

**Venting:**

Yes/No

NO

Comment:

Corrective Action:

Date:

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**Facility ID: 284812 Type: WELL API Number: 071-08803 Status: PR Insp. Status: PR**Producing Well**Comment: Corrective Action: Date: **BradenHead**Date of Last Brhd Test: 07/12/2023 Annual Brhd Completed? YesLast Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: End Surf Csg Pressure: 0Comment: Corrective Action: Date: Facility ID: 444509 Type: SPILL OR API Number: - Status: CL Insp. Status: CL**Producing Well**Comment: 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

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
695108824	INSP. PHOTOS	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6346754">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6346754</a>