

**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:

01/24/2024

Submitted Date:

01/24/2024

Document Number:

693201136**FIELD INSPECTION FORM**Loc ID 322300 Inspector Name: Murray, Richard On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 73372Name of Operator: RANCHO TRESAddress: BOX BCity: RIFLE State: CO Zip: 81650**Status Summary:**

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

Findings:3 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
Murray, Richard		g.richard.murray@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
210186	WELL	AC	02/01/1961	DM	045-05083	BERT EATON 1 (OWP)	PA
484439	Domestic Tap	AC	05/10/2023		-	Domestic Tap 27SESE	PA

General Comment:

Well was plugged by ECMC Orphan Well Program

Inspected FacilitiesFacility ID: 210186 Type: WELL API Number: 045-05083 Status: AC Insp. Status: PA**Cement**Cement ContractorContractor Name: Black Frac Tanks

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging OperationsDepth Plugs(feet range): 1844Cement Volume (sx): 131Good Return During Job: YESCement Type: 2Comment: See Form 6 subsequent for well plugging information

Corrective Action: _____

Date: _____

Facility ID: 484439 Type: Domestic Tap API Number: - Status: AC Insp. Status: PA**Flowline**

#1 Type:Non-Well Site

1 of Lines

Flowline DescriptionFlowline Type: Non-Well SiteSize: OtherMaterial: Poly

Variance: _____

Age: _____

Contents: Natural GasIntegrity Summary

Failures: _____

Spills: _____

Repairs Made: _____

Coatings: _____

H2S: _____

Cathodic Protection: _____

Pressure Testing

Witnessed: _____

Test Result: _____

Charted: _____

COGCC Rules(check all that apply)☐ 1101. Installation and Reclamation☐ 1102. Operations, Maintenance, and Repair☒ 1103. AbandonmentComment: Domestic Tap Plugged at well location and Road Crossing

Corrective Action: _____

Date: _____

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

Document Num	Description	URL
693201137	Well Marker	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6404794
693201138	Casing Picture	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6404795