

**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:

02/07/2024

Submitted Date:

03/11/2024

Document Number:

698601641

FIELD INSPECTION FORM

Loc ID 304952 Inspector Name: St John, William (Cal) On-Site Inspection 2A Doc Num: _____

Status Summary:

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

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

Findings:

14 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 | 970-332-3585 | pat.dolezal@ownresources.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 277059 | WELL | PR | 01/01/2022 | GW | 125-09192 | FONTE 33-21 | SI |

General Comment:

[Rig and well repair inspection.](#)

| Location | | | |
|--|---|--------|-----------------|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Two track off maintained County Road. Active agricultural cropland with seasonal access to well location. | | |
| Corrective ActionL | | | Date: |
| Overall Good: <input type="checkbox"/> | | | |
| Signs/Marker: | | | |
| Type | DRILLING/RECOMP | | |
| Comment: | Rig information sign posted at CR and access road. | | |
| Corrective Action: | | | Date: |
| Type | WELLHEAD | | |
| Comment: | Well sign posted at CR and access road. | | |
| Corrective Action: | | | Date: |
| Emergency Contact Number: | | | |
| Comment: | Emergency contact information posted on well sign. | | |
| Corrective Action: | | | Date: _____ |
| Overall Good: <input checked="" type="checkbox"/> | | | |
| Spills: | | | |
| Type | Area | Volume | |
| In Containment: No | | | |
| Comment: | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | |
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | Stock panel fencing around surface equipment at well location. | | |
| Corrective Action: | | | Date: |
| Equipment: | | | |
| Type: Prime Mover | # 1 | | corrective date |
| Comment: | Electric Motor. | | |
| Corrective Action: | | | Date: |
| Type: Pump Jack | # 1 | | |
| Comment: | Horsehead removed for well work. | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Pump Jack Power and Control Panel. | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Wellhead. Rods and tubing removed from wellbore for casing repair work. Casing valve closed. | | |
| Corrective Action: | | | Date: |

| | | |
|--------------------|--------------------------------|-------|
| Type: Bradenhead | # 1 | |
| Comment: | Bradenhead plumbed to surface. | |
| Corrective Action: | | Date: |

Venting:

| | | |
|--------------------|----|-------|
| Yes/No | NO | |
| Comment: | | |
| Corrective Action: | | Date: |

Flaring:

| | |
|--------------------|-------|
| Type | |
| Comment: | |
| Corrective Action: | Date: |

Inspected Facilities

Facility ID: 277059 Type: WELL API Number: 125-09192 Status: PR Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Well SI for casing repair work.

Corrective Action: _____

Date: _____

Workover

Comment: Excell Services LLC, Workover Rig #5 is currently rigged up on well for repair. Pump Jack Horsehead removed. Rods and tubing have been removed from wellbore. Swage nipple and valve installed on production casing string. Well is loaded for pressure test. Well will not pass pressure test. Operator to evaluate and determine next steps for continuing to attempt to repair or move forward with plugging and abandoning well. Service Rig sign at CR intersection. Rig floor and walkway safety barriers and equipment in use. Personal PPE in use.

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 | | | | | |

Comment: No stormwater issues noted at time of inspection.

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 |
|--------------|--------------------|---|
| 698601743 | Inspection photos. | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6461565 |