

**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:

04/11/2024

Submitted Date:

04/12/2024

Document Number:

715200047

FIELD INSPECTION FORMLoc ID 303366 Inspector Name: Welsh, Brian On-Site Inspection ☐ 2A Doc Num: ☐**Operator Information:**

ECMC 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:

7 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	
Taylor, Chad		chad.taylor@state.co.us	
Quint, Craig		craig.quint@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
252995	WELL	SI	01/01/2024	DSPW	125-06872	BONNY DISPOSAL WELL 1	SI

General Comment:

Routine UIC Inspection

Location

Lease Road:			
Type	Access		
comment:	Access off of CR 7		
Corrective Action		Date:	

Overall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign mounted to pump shed		
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	Metal signs by water tanks		
Corrective Action:		Date:	

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: Ancillary equipment	# 3		
Comment:	Electric panel, filter pot and electric transfer pump in metal shed		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	3	OTHER	FIBERGLASS AST		39.673330,-102.233400
Comment:	3-750bbls tanks				
Corrective Action:					Date:

Paint

Condition					
Other (Content)					
Other (Capacity)	750bbls				
Other (Type)					

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Sufficent	Base Sufficient	Adequate

Comment:		
Corrective Action:		Date:
<u>Venting:</u>		
Yes/No		
Comment:		
Corrective Action:		Date:
<u>Flaring:</u>		
Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 252995

Type: WELL

API Number: 125-06872

Status: SI

Insp. Status: SI

Underground Injection Control

UIC Violation:

Maximum Injection Pressure:

UIC Routine

Inj./Tube:

Pressure or inches of Hg 0 PSIG

Previous Test Pressure

MPP

(e.g. 30 psig or -30" Hg)

Inj Zone: LKTA

TC:

Pressure or inches of Hg 0 PSIG

Previous Test Pressure

Last MIT: 05/05/2020

Brhd:

Pressure or inches of Hg

Previous Test Pressure

AnnMTReq: NO

Comment:

WELL IS SI AT TIME OF INSPECTION. CASING HAD LIGHT PUFF, DIED IMMEDIATELY. TBG SI

Corrective Action:

Date:

Method of Injection: PUMP FEED

Test Type:

Tbg psi:

Csg psi:

BH psi:

Insp. Status:

Comment:

Corrective Action:

Date:

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

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	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT