

FORM
INSPRev
X/20State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

08/07/2024

Submitted Date:

08/12/2024

Document Number:

715200662

FIELD INSPECTION FORM

Loc ID 337878 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:

9 Number of Comments

1 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	
Hansen, Logan		logan.hansen@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
289245	WELL	SI	05/01/2023	GW	125-10704	ALLEN 31-12	PA

General Comment:

Final Routine Inspection

Location					
Overall Good: <input type="checkbox"/>					
Emergency Contact Number:					
Comment:				Date: _____	
Corrective Action:					
Overall Good: <input type="checkbox"/>					
Spills:					
Type	Area	Volume			
In Containment: No					
Comment:					
<input type="checkbox"/> Multiple Spills and Releases?					
Equipment:					
				corrective date	
Type: Gas Meter Run		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Type: Pump Jack		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Type: Deadman # & Marked		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Type: Prime Mover		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Type: Ancillary equipment		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Type: Vertical Separator		# 0			
Comment:		Removed from location			
Corrective Action:				Date:	
Venting:					
Yes/No					
Comment:					
Corrective Action:				Date:	
Flaring:					
Type					
Comment:					
Corrective Action:				Date:	

Inspected Facilities									
Facility ID:	289245	Type:	WELL	API Number:	125-10704	Status:	SI	Insp. Status:	PA
The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12									

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____ Date _____

1002b. SOIL REMOVAL AND
SEGREGATION _____

Comment _____

Corrective Action _____ Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____ Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____ Date _____

1003a. Waste and Debris removed? _____

Comment _____

Corrective Action _____ Date _____

Unused or unneeded equipment onsite? _____

Comment _____

Corrective Action _____ Date _____

Pit, cellars, rat holes and other bores closed? _____

Comment _____

Corrective Action _____ Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____ Date _____

- 1003b. Area no longer in use? _____ Production areas stabilized ? _____
- 1003c. Compacted areas have been cross ripped? _____
- 1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
- Cuttings management: _____
- 1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
- Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATIONCropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____ Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: Location is located in actively grazed pasture

Well plugged Pass Pit mouse/rat holes, cellars backfilled Pass

Debris removed Pass No disturbance /Location never built In

Access Roads Regraded In Contoured In Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed In Locations, facilities, roads, recontoured In

Compaction alleviation In Dust and erosion control _____

Non cropland: Revegetated 80% In Cropland: perennial forage _____

Weeds present In Process Subsidence _____

1004.d. FINAL VEGETATION TRANSECT

TRANSECT RESULTS OF DISTURBED AREA% _____

TRANSECT RESULTS OF REFERENCE AREA% _____

TOTAL % OF DESIRABLE VEGETATION COVER _____

VEGETATIVE COVER _____

Comment: Well has been plugged. Wellhead has been cut, capped and covered. Form 6S (403614230) is In Process. Equipment has been removed from location and ready for final reclamation. Location has been ripped and seeded with mulching in place at time of inspection. Final reclamation will be verified by reclamation specialist

Corrective Action: Continue with final reclamation process Date _____

Overall Final Reclamation	In Process	Well Release on Active Location	<input type="checkbox"/>	Multi-Well Location	<input type="checkbox"/>
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Attached Documents

You can go to ECMC Images (<https://ecmc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
715200678	location photo	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6662087