

**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:

10/28/2024

Submitted Date:

10/28/2024

Document Number:

711901364

**FIELD INSPECTION FORM**

Loc ID: 317047 Inspector Name: SCHURE, KYM 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:**

ECMC Operator Number: 10690  
Name of Operator: IMPETRO RESOURCES LLC  
Address: 558 CASTLE PINES PKWY UNIT B-4  
City: CASTLE PINES State: CO Zip: 80108

**Findings:**

10 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
Bongers, Brent	361-935-5633	bbongers@impetroresources.com	All Inspections

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
234916	WELL	PR	09/01/2023	OW	121-07061	PETRIE, A L 2	PR

**General Comment:**

ROUTINE FIR SATISFACTORY

**Location**

**Lease Road:**

Type	Access		
comment:	SATISFACTORY - CROPLAND		
Corrective Action:		Date:	

Overall Good:

**Signs/Marker:**

Type	WELLHEAD		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Type	BATTERY		
Comment:	SATISFACTORY		
Corrective Action:		Date:	

Emergency Contact Number:

Comment:	SATISFACTORY		
Corrective Action:		Date:	

Overall Good:

**Spills:**

Type	Area	Volume			

In Containment: No

Comment: NONE

Multiple Spills and Releases?

**Equipment:**

Type: Other	# 0		corrective date
Comment:	NO CHANGE FROM EQUIPMENT INVENTORIED		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
Comment:	NO CHANGE				
Corrective Action:		Date:			

**Paint**

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance

Comment:		
Corrective Action:		Date:

**Venting:**

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**

Facility ID: 234916 Type: WELL API Number: 121-07061 Status: PR Insp. Status: PR

**Producing Well**

Comment: OW

Corrective Action:

Date:

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

**ECMC Comments**

Comment	User	Date
<u>ROUTINE FIR SATISFACTORY</u>	<u>schureky</u>	<u>10/28/2024</u>