

**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:

12/09/2024

Submitted Date:

12/09/2024

Document Number:

697505568

FIELD INSPECTION FORM

Loc ID 335663 Inspector Name: Binschus, Chris 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: 10633
Name of Operator: CRESTONE PEAK RESOURCES OPERATING LLC
Address: 555 17TH STREET SUITE 3700
City: DENVER State: CO Zip: 80202

Findings:

6 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 |
|--------------|-------|-------------------------------|---------|
| | | inspections@civiresources.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|----------|--------|-------------|------------|-----------|--------------------------------------|-------------|
| 242210 | WELL | PA | 12/13/2017 | GW | 123-10001 | EDWARD P COSTIGAN 1 | RI |
| 278553 | WELL | PA | 03/21/2023 | GW | 123-23057 | COSTIGAN 33-20 | RI |
| 301573 | WELL | PA | 02/25/2021 | OW | 123-30058 | COSTIGAN 34-20 | RI |
| 301574 | WELL | PA | 03/27/2019 | GW | 123-30059 | COSTIGAN 43-20 | RI |
| 301900 | WELL | PA | 12/03/2020 | OW | 123-30124 | COSTIGAN 6-8-20 | RI |
| 335663 | LOCATION | CL | | | - | COSTIGAN MULTI WELL PAD(SESE) 8-6-20 | RI |
| 414608 | WELL | PA | 06/08/2023 | GW | 123-30790 | COSTIGAN 8-6-20 | RI |
| 417672 | WELL | PA | 03/21/2023 | OW | 123-31717 | COSTIGAN 8-8-20 | RI |

General Comment:

This is a desktop Final Reclamation Inspection in response to a Form 4 Final Reclamation Complete Notice (Doc. # 403901632) using cropland drone documentation per the ECMC Operator Guidance.

This is a Final Reclamation Inspection at a plugged and abandoned multi-well location and the associated tank battery. The last well (123-30790) was plugged and abandoned 06/08/2023.

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date:

Overall Good:

Spills:

| Type | Area | Volume | | |
|------|------|--------|--|--|
| | | | | |

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

| Type: | # | | corrective date |
|--------------------|---|--|-----------------|
| Comment: | Based on Operator supplied information, all equipment has been removed from the location. | | |
| Corrective Action: | | | Date: |

Venting:

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

Flaring:

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

| Inspected Facilities | | | | |
|--|-----------------------|------------------------------|-------------------|-------------------------|
| Facility ID: <u>242210</u> | Type: <u>WELL</u> | API Number: <u>123-10001</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>278553</u> | Type: <u>WELL</u> | API Number: <u>123-23057</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>301573</u> | Type: <u>WELL</u> | API Number: <u>123-30058</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>301574</u> | Type: <u>WELL</u> | API Number: <u>123-30059</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>301900</u> | Type: <u>WELL</u> | API Number: <u>123-30124</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>335663</u> | Type: <u>LOCATION</u> | API Number: <u>-</u> | Status: <u>CL</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>414608</u> | Type: <u>WELL</u> | API Number: <u>123-30790</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |
| Facility ID: <u>417672</u> | Type: <u>WELL</u> | API Number: <u>123-31717</u> | Status: <u>PA</u> | Insp. Status: <u>RI</u> |
| The subreport 'InspWellFlowline' could not be found at the specified location \\10 14 12 | | | | |

Environmental

Spills/Releases:

Type of Spill: _____ Estimated Spill Volume: _____

Comment: After reviewing the Operator supplied information, ECMC confirms that all Spill and Remediation projects are approved and closed.

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well Complaint:

DWR Receipt Num: _____ Owner Name: _____ GPS : _____ Lat _____ Long _____

Field Parameters:

Sample Location: _____ Comment: _____

Reclamation - Storm Water - Pit

Interim Reclamation:

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

Land Use: DRY LAND

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 REVEGETATION

Cropland

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: DRY LAND _____

Reminder: _____

Comment:

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

Debris removed Pass No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

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

Compaction alleviation _____ Dust and erosion control _____

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

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT
 TRANSECT RESULTS OF DISTURBED AREA% _____
 TRANSECT RESULTS OF REFERENCE AREA% _____
 TOTAL % OF DESIRABLE VEGETATION COVER _____
 VEGETATIVE COVER _____

Comment:

Corrective Action: Date:

Overall Final Reclamation Pass Well Release on Active Location Multi-Well Location

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Comment:

Corrective Action: Date:

Pits: NO SURFACE INDICATION OF PIT