

**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:

03/20/2025

Submitted Date:

03/20/2025

Document Number:

716300670**FIELD INSPECTION FORM**Loc ID 308876 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**ECMC Operator Number: 10705Name of Operator: EVERGREEN NATURAL RESOURCES LLCAddress: 1875 LAWRENCE ST STE 1150City: DENVER State: CO Zip: 80202**Status Summary:**

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

Findings:5 Number of Comments0 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
Distribution, Evergreen	719-846-7898	cogcc.evergreen@enrllc.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
284252	WELL	PR	09/14/2006	CBM	071-08757	TRINITY 33-13	PR

General Comment:

LocationOverall Good: ☒

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: Progressive Cavity

1

Comment:

Corrective Action:

Date:

Type: Compressor

1

Comment: NOT IN USE AT TIME OF INSPECTION

Corrective Action:

Date:

Type: Prime Mover

1

Comment:

Corrective Action:

Date:

Type: Ancillary equipment

1

Comment:

Corrective Action:

Date:

Type: Bradenhead

1

Comment: IS ACCESSABLE

Corrective Action:

Date:

Type: Deadman # & Marked

4

Comment:

Corrective Action:

Date:

Type: Gas Meter Run

1

Comment: CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR.

Corrective Action:

Date:

Type: Vertical Separator

1

Comment:

Corrective Action:

Date:

Venting:

Yes/No NO

Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities									
Facility ID:	284252	Type:	WELL	API Number:	071-08757	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:		SUBMIT REPORTS							
Corrective Action:								Date:	
BradenHead									
Date of Last Brhd Test:		07/17/2024		Annual Brhd Completed?		Yes			
Last Brhd Test Results		Initial Surf Csg Pressure:		0		Fluid Type: NONE			
		End Surf Csg Pressure:		0					
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

Comment:

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NOPit ID: 287548Lat: 37.257290Long: -104.945900

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type: _____

Liner Condition: _____

Comment: _____

Corrective _____

Date: _____

Fencing:Fencing Type: None

Fencing Condition: _____

Comment: _____

Corrective _____

Date: _____

Netting:

Netting Type: _____

Netting Condition: _____

Comment: _____

Corrective _____

Date: _____

Anchor Trench Present: NOOil Accumulation: NO2+ feet Freeboard: YES

Comment: _____

Corrective _____

Date: _____

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

Document Num	Description	URL
716300671	INSP. PHOTOS	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6968448