

**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:

06/03/2025

Submitted Date:

06/03/2025

Document Number:

719000159

FIELD INSPECTION FORM

Loc ID _____ Inspector Name: GARCIA, CHARLES On-Site Inspection
326463 _____ 2A Doc Num: _____

Operator Information:

ECMC Operator Number: 10133
Name of Operator: HILCORP ENERGY COMPANY
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

Status Summary:

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

Findings:

11 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
Labowskie, Steve		steve.labowskie@state.co.us	
, General		FarmingtonRegulatoryTechs@hilcorp.com	SJB inspect

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
216542	WELL	PR	08/05/1998	CBM	067-08148	KENDRICK 3-31	PR

General Comment:

Inspection Report Summary
On 6/3/25 I Inspector Charles Garcia conducted an on-site inspection.
Location: KENDRICK 3-31
Operator:HILCORP ENERGY COMPANY
API#: 067-08148
County: LaPlata
Date

Location

Overall Good:

Signs/Marker:			
Type	OTHER		
Comment:	LOCATION SIGN AT LOCATION ENTRANCE		
Corrective Action:		Date:	

Emergency Contact Number:		
Comment:	505-324-5170 911 EMENGERCY	
Corrective Action:		Date:

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	PUMP JACK		
Comment:	CATTLE PANELS		
Corrective Action:		Date:	

Equipment:			corrective date
Type: Prime Mover	# 1		
Comment:	GAS		
Corrective Action:		Date:	
Type: Flow Line	# 1		
Comment:			
Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	LAST CALIABRATION 3/10/25		
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment:			
Corrective Action:		Date:	
Type: Vertical Heated Separator	# 1		
Comment:			
Corrective Action:		Date:	
Type: Ancillary equipment	# 1		

Comment: LUBE OIL TANK FOR GAS PRIME MOVER WITH SPILL PREVENTION			
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment: ALL DEADMEN MARKERS ARE ON THE GROUND			
Corrective Action:			Date:
Type: Other	# 1		
Comment: WELLHEAD			
Corrective Action:			Date:
Type: Bird Protectors	# 1		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment: TELEMETRY EQUIPMENT			
Corrective Action:			Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type			
Comment:			
Corrective Action:			Date:

Inspected Facilities

Facility ID: 216542 Type: WELL API Number: 067-08148 Status: PR Insp. Status: PR

Producing Well

Comment:

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 04/15/2025 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

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
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
719000161	LOCATION PICTURES	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7080612