

**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:

06/10/2025

Submitted Date:

06/11/2025

Document Number:

711902404

FIELD INSPECTION FORM

Loc ID: 313874 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: 10491
Name of Operator: STARLIGHT ENERGY CORPORATION
Address: 11757 WEST KEN CARYL AVENUE F-303
City: LITTLETON State: CO Zip: 80127

Findings:

- 7 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
		bbentley@starlightenergy.us	
Burn, Diana		diana.burn@state.co.us	
Bentley, Brian		brianbent@aol.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
226659	WELL	TA	02/01/2022	GW	087-07397	STROH 1	TA

General Comment:

SnapShot 2025 GW remains TA, this well has never been produced, Operator is intending on using well to supply NG to generate power upon property that well is located. Last MIT 2-21-2022

NOTE TO OPERATOR: ECMC DATABASE INDICATES FORMS 1-B AND 3A ARE PAST DUE REQUIRING ATTENTION, PLEASE CONTACT ECMC ENGINEERING GROUP FOR DIRECTIVES. PLEASE UPDATE ECMC DATABASE/SCOUTCARD WITH CURRENT CONTACT INFORMATION FOR OPERATOR.

CALLED EMERGENCY CONTACT NO. - BRIAN BENTLEY RETURNED CALL WITHIN (1) HR.

Location			
Lease Road:			
Type	Access		
comment:	MAINTAIN LEASE ROAD		
Corrective ActionL		Date:	
Overall Good: <input type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:	SATISFACTORY		
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:	SATISFACTORY		
Corrective Action:			Date: _____
Overall Good: <input type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:	NONE		
<input type="checkbox"/> Multiple Spills and Releases?			
Equipment:			
Type: Other	# 0		corrective date
Comment:	NO CHANGE - STAND ALONE GW		
Corrective Action:		Date:	
Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 226659 Type: WELL API Number: 087-07397 Status: TA Insp. Status: TA

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: ECMC ENGINEERING GROUP SHOWS FORM 1B AND 3A ARE PAST DUE - CONTACT ECMC ENGINEERING FOR DIRECTIVES

Corrective Action: CONTACT ECMC ENGINEERING GROUP FOR DIRECTIVES. Date: 06/30/2025

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

ECMC Comments

Comment	User	Date
SNAPSHOT 2025 FIR	schureky	06/11/2025