

**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:

06/11/2025

Submitted Date:

06/14/2025

Document Number:

698603692

**FIELD INSPECTION FORM**Loc ID 303831 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**

ECMC Operator Number: 10699

Name of Operator: OWN RESOURCES OPERATING LLC

Address: 305 S RIDGE STREET #6279

City: BRECKENRIDGE State: CO Zip: 80424

**Status Summary:**

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

**Findings:**

14 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 |
|--------------|--------------|------------------------------|---------|
| Dolezal, Pat | 970-332-3585 | pat.dolezal@ownresources.com |         |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 253672      | WELL | PR     | 09/22/1995  | GW         | 125-07550 | FONTE 41-22   | PR          |

**General Comment:**

Routine Inspection.

**Location**

|                    |                                       |       |  |
|--------------------|---------------------------------------|-------|--|
| <b>Lease Road:</b> |                                       |       |  |
| Type               | Access                                |       |  |
| comment:           | Two track off maintained County Road. |       |  |
| Corrective Action  |                                       | Date: |  |

Overall Good: ☐

|                      |   |       |  |
|----------------------|---|-------|--|
| <b>Signs/Marker:</b> |   |       |  |
| Type                 | OTHER   |       |  |
| Comment:             | Lease sign posted at access trail intersection. |       |  |
| Corrective Action:   |   | Date: |  |
| Type                 | WELLHEAD  |       |  |
| Comment:             | Lease sign at wellhead location.                |       |  |
| Corrective Action:   |   | Date: |  |

Emergency Contact Number:

Comment: Emergency contact information posted on Lease sign.

Corrective Action:

Date: \_\_\_\_\_

Overall Good: ☒

|                |      |        |  |  |
|----------------|------|--------|--|--|
| <b>Spills:</b> |      |        |  |  |
| Type           | Area | Volume |  |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                    |  |       |  |
|--------------------|--|-------|--|
| <b>Fencing/:</b>   |  |       |  |
| Type               | WELLHEAD   |       |  |
| Comment:           | Stock panel fencing around surface equipment at well location. |       |  |
| Corrective Action: |  | Date: |  |

|                          |  |       |                 |
|--------------------------|--|-------|-----------------|
| <b>Equipment:</b>        |  |       | corrective date |
| Type: Vertical Separator | # 1  |       |                 |
| Comment:                 |  |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Bradenhead         | # 1  |       |                 |
| Comment:                 | Bradenhead plumbed to surface.   |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Gas Meter Run      | # 1  |       |                 |
| Comment:                 | Digital Gas Meter Run. Meter Calibration/Test Log dated 8-26-24. Well Inlet Valve open. Gas Outlet Valve open. |       |                 |
| Corrective Action:       |  | Date: |                 |
| Type: Pump Jack          | # 1  |       |                 |
| Comment:                 |  |       |                 |
| Corrective Action:       |  | Date: |                 |

|                           |   |       |  |
|---------------------------|---|-------|--|
| Type: Ancillary equipment | # 1   |       |  |
| Comment:                  | Pump Jack Power and Control Panel.  |       |  |
| Corrective Action:        |   | Date: |  |
| Type: Prime Mover         | # 1   |       |  |
| Comment:                  | Electric Motor.   |       |  |
| Corrective Action:        |   | Date: |  |
| Type: Other               | # 1   |       |  |
| Comment:                  | Separator/Gas Meter Shed.   |       |  |
| Corrective Action:        |   | Date: |  |
| Type: Ancillary equipment | # 1   |       |  |
| Comment:                  | Wellhead. Casing production. Rods and tubing in the wellbore. Tubing valve closed. Casing valve open. |       |  |
| Corrective Action:        |   | Date: |  |

**Venting:**

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

**Flaring:**

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

| Inspected Facilities |   |       |      |             |           |         |    |               |    |
|----------------------|---|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID:         | 253672  | Type: | WELL | API Number: | 125-07550 | Status: | PR | Insp. Status: | PR |
| Producing Well       |   |       |      |             |           |         |    |               |    |
| Comment:             | Rods and tubing in wellbore. Tubing valve closed. Casing valve open. Gas Meter Run Valves: Well inlet valve open, Gas outlet valve open.<br><br>Electronic Well File reflects last Production/Status reported 4/1/2025 and Well Status as PR. Based on current valve settings at time of inspection the well is PR. |       |      |             |           |         |    |               |    |
| 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                  |               |                          |         |

Comment: No stormwater issues noted at time of inspection.

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   |
| 698603712    | Inspection photos. | <a href="https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7095700">https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7095700</a> |