

**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:

07/11/2025

Submitted Date:

07/12/2025

Document Number:

693808857

FIELD INSPECTION FORM

Loc ID 311853 Inspector Name: BROWNING, CHUCK 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: 10384
Name of Operator: GENESIS GAS & OIL COLORADO LLC
Address: 1141 NORTH LOOP 1604 E 105-414
City: SAN ANTONIO State: TX Zip: 78232

Findings:

- 16 Number of Comments
- 12 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
Pesicka, Conor		conor.pesicka@state.co.us	
Beasley, Nolan		nolan.beasley@state.co.us	UIC Lead
,		dnr_cogccengineering@state.co.us	
Beach, David	(303) 909-6401	dbeach@genesishgoco.com	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector
Labowskie, Steve		steve.labowskie@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286511	WELL	SI	07/01/2023	CBM	103-10888	FLETCHER GULCH 3-31	SI
293056	WELL	SI	07/01/2023	DSPW	103-11095	FLETCHER GULCH 3-31WD	SI

General Comment:

Routine UIC inspection.
Issues were found requiring corrective action. CA(s) from previous inspection not completed.
See inspection text and photos for details. Any Corrective Actions from previous inspections that have not been addressed are still applicable.

Location			
Lease Road:			
Type	Main		
comment:			
Corrective ActionL		Date:	
Type	Access		
comment:			
Corrective ActionL		Date:	
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	TANK LABELS/PLACARDS		
Comment:	Sign or label not posted or information inaccurate on tanks or containers or sign/label too small to read at distance or installed in place where not visible. CA(s) from previous inspection not completed.		
Corrective Action:	Install sign to comply with Rule 605.h.	Date:	07/11/2025
Type	WELLHEAD		
Comment:	Sign not posted or information inaccurate at well(s). CA(s) from previous inspection not completed.		
Corrective Action:	Install sign to comply with Rule 605.d.	Date:	07/11/2025
Type	BATTERY		
Comment:	Sign not posted or information inaccurate at centralized E&P waste management facility CA(s) from previous inspection not completed.		
Corrective Action:	Install sign to comply with Rule 605.f.	Date:	07/11/2025
Emergency Contact Number:			
Comment:	No curreent emergency contact number		
Corrective Action:	Install sign to comply with Rule 605.a.		Date: 07/11/2025
Good Housekeeping:			
Type	WEEDS		
Comment:	Noxious weeds including species observed in and around any disturbance or spread onto adjacent lands associated with oil and gas activities.		
Corrective Action:	Comply with Rule 1003.f.	Date:	07/11/2025
Type	UNUSED EQUIPMENT		
Comment:	Unused equipment and junk parts scattered around pad. CA(s) from previous inspection not completed.		
Corrective Action:	Comply with Rule 606	Date:	07/11/2025
Type	OTHER		
Comment:	Buckets and barrel full of unknown fluids. CA(s) from previous inspection not completed		
Corrective Action:	Comply with Rule 606	Date:	07/11/2025
Overall Good: <input type="checkbox"/>			
Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:		corrective date
Type: Deadman # & Marked	# 4	
Comment:	Guy line anchors not marked	
Corrective Action:	Install proper guy line markers per Rule 1003.a	Date: 07/11/2025
Type: Gas Meter Run	# 1	
Comment:		
Corrective Action:		Date:
Type: Bradenhead	# 2	
Comment:		
Corrective Action:		Date:
Type: Prime Mover	# 1	
Comment:	Pump inside housing	
Corrective Action:		Date:
Type: Vertical Separator	# 1	
Comment:		
Corrective Action:		Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	4	400 BBLs	HEATED STEEL AST		40.083098,-108.609927
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Insufficient	Base Insufficient	Inadequate
Comment:	Berms damaged			
Corrective Action:	Repair or install berms or other secondary containment devices per Rule 912.d.(1).			Date: 07/11/2025

Venting:

Yes/No	NO
Comment:	
Corrective Action:	Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 286511 Type: WELL API Number: 103-10888 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHead

Date of Last Brhd Test: 12/26/2022 Annual Brhd Completed? No

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

End Surf Csg Pressure: 0

Comment: No annual bradenhead test Form 17 on file. 07/11/2025

Corrective Action: Submit Form 17 as directed by Rule 419.c Date: _____

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

Facility ID: 293056 Type: WELL API Number: 103-11095 Status: SI Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____

(e.g. 30 psig or -30" Hg)

Inj Zone: SEGO

TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 10/15/2018

Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Defined Inactive 05/31/2023
Last MIT 10/15/2018 No current MIT on record. CA from previous inspection not completed.

Corrective Action: Perform MIT per Rule 417.a. (1) Date: 07/11/2025

Method of Injection: PUMP FEED

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

BradenHead

Date of Last Brhd Test: _____ Annual Brhd Completed? No

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

End Surf Csg Pressure: _____

Comment: No annual bradenhead test Form 17 on file. 07/11/2025

Corrective Action: Submit Form 17 as directed by Rule 419.c Date: _____

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Attached Documents

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

Document Num	Description	URL
693808862	Inspection photos 7/11/2025	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7139071