

**FORM  
INSP**

Rev  
X/20

**State of Colorado  
Energy and Carbon Management Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:

09/19/2025

Submitted Date:

09/19/2025

Document Number:

716301527

**FIELD INSPECTION FORM**

Loc ID: 307902    Inspector Name: Beardslee, Tom    On-Site Inspection:     2A Doc Num: \_\_\_\_\_

**Operator Information:**

ECMC Operator Number: 10758  
Name of Operator: OGRIS OPERATING LLC  
Address: PO BOX 53467  
City: MIDLAND    State: TX    Zip: 79710

**Status Summary:**

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

**Findings:**

6    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
B WARD, GIENA		gward@ogrisop.com	<a href="#">All Inspections</a>
BACA, DAVE	719-859-4066	dbaca@ogrisop.com	<a href="#">All Inspections</a>

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
259273	WELL	PR	05/05/2007	CBM	071-07231	HILL RANCH 31-02 V	PR

**General Comment:**

"This is a field audit of the scout card, related documents and the location."

**Location**

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

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

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

<b>Equipment:</b>			corrective date
Type: Prime Mover	# 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:
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:			
Corrective Action:			Date:

**Venting:**

Yes/No NO

Comment:

Corrective Action:

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

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**

Facility ID: 259273 Type: WELL API Number: 071-07231 Status: PR Insp. Status: PR

**Producing Well**

Comment: PR

Corrective Action:

Date:

**BradenHead**

Date of Last Brhd Test: 09/23/2024 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
716301528	INSP. PHOTOS	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7244946">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7244946</a>