

**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:

10/30/2025

Submitted Date:

10/31/2025

Document Number:

715203297

**FIELD INSPECTION FORM**

Loc ID 314214 Inspector Name: Welsh, Brian 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: 83130  
Name of Operator: STRACHAN EXPLORATION INC  
Address: 992 S 4TH AVE SUITE 100-461  
City: BRIGHTON State: CO Zip: 80601

**Findings:**

- 15 Number of Comments
- 2 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
Harms, Jason		Jason@strachanexploration.com	
Reed, Shawn	303-562-6530	shawn@sreedconsulting.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
273473	WELL	PR	10/18/2004	GW	099-06879	STATE 1-14	PR

**General Comment:**

[This is a field audit of the scout card, related documents and the location conducted by SE Compliance Specialist Brian Welsh](#)

<b>Location</b>			
<b>Lease Road:</b>			
Type	Access		
comment:	Dirt road through pasture		
Corrective ActionL			Date:
Overall Good: <input checked="" type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	TANK LABELS/PLACARDS		
Comment:	Stickers on water tank. Metal sign by open top tank		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Lease sign mounted to fence at separator		
Corrective Action:			Date:
Emergency Contact Number:			
Comment:	<input type="text"/>		
Corrective Action:	<input type="text"/>		Date: _____
<b>Good Housekeeping:</b>			
Type	STORAGE OF SUPL		
Comment:	Tubing laying next to compressor needs removed from location		
Corrective Action:	Remove unnecessary equipment to comply with Rule 606.		Date: 11/30/2025
Overall Good: <input checked="" type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:	<input type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Fencing/:</b>			
Type	SEPARATOR		
Comment:	Wire panels around separator and booster compressor		
Corrective Action:			Date:
Type	TANK BATTERY		
Comment:	Wire panels around tank battery		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Wire panels around wellhead		
Corrective Action:			Date:
<b>Equipment:</b>			
Type: Horizontal Heated Separator	# 1		corrective date
Comment:	Separator next to compessor		

Corrective Action:		Date:	
Type: Gas Meter Run	# 1		
Comment:	Meter run on north side of separator		
Corrective Action:		Date:	
Type: Compressor	# 1		
Comment:	Booster compressor next to separator		
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	300 BBLs	FIBERGLASS AST		38.217830,-102.654430
Comment:					
Corrective Action:					Date:

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Sufficient	Base Sufficient	Inadequate
Comment:	Berms need maintenance for capacity			
Corrective Action:	Repair or install berms or other secondary containment devices per Rule 912.d.(1).			Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	100 BBLs	Open Top		38.217830,-102.654430
Comment:	Fiberglass open top water tank on west side of 300bbl tank				
Corrective Action:					Date:

**Paint**

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

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	Shared berms			
Corrective Action:				Date:

**Venting:**

Yes/No	
Comment:	

Corrective Action:		Date:	
--------------------	--	-------	--

**Flaring:**

Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 273473 Type: WELL API Number: 099-06879 Status: PR Insp. Status: PR

**Producing Well**

Comment: [Producing](#)

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:

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
404418919	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7312131">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7312131</a>
715203320	location photo	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7312128">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7312128</a>