

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: <u>11/14/2025</u> Submitted Date: <u>11/14/2025</u> Document Number: <u>719000942</u>
FIELD INSPECTION FORM			

Loc ID _____ Inspector Name: GARCIA, CHARLES On-Site Inspection
 326137 _____ 2A Doc Num: _____

Status Summary:

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

Findings:

3 _____ Number of Comments
 0 _____ Number of Corrective Actions
 Corrective Action Response Requested

Operator Information:

ECMC Operator Number: 10133
 Name of Operator: HILCORP ENERGY COMPANY
 Address: P O BOX 61229
 City: HOUSTON State: TX Zip: 77208

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

Contact Information:

Contact Name	Phone	Email	Comment
Labowskie, Steve		steve.labowskie@state.co.us	
, General		FarmingtonRegulatoryTechs@hilcorp.com	SJB inspect

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215932	WELL	PR	08/01/1991	CBM	067-07537	HUBER-JEFFRIES 1-5	PR

General Comment:

[Inspection Report Summary](#)
 On 11/14/25 I Inspector Charles Garcia conducted an on-site follow up inspection.
 Location: HUBER-JEFFRIES 1-5
 API# 067-07537
 Operator: HILLCORP ENERGY COMPANY
 County: LaPlata
 DOC#719000886
[FIR#404426457 CA RESOLVED SEE LOCATION PICTURES](#)

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type				corrective date
Prime Mover	# 1			
Comment:	GAS ENGINE HAS OIL LEAK AND STARTING TO FILL SKID WITH OIL SEE LOCATION PICTURES MAINTAIN ENGINE RULE 608.e CA RESOLVED SEE LOCATION PICTURES			
Corrective Action:				Date: _____

Venting:

Yes/No			
Comment:			
Corrective Action:			Date: _____

Flaring:

Type		
Comment:		
Corrective Action:		Date: _____

