

**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:

11/26/2025

Submitted Date:

12/02/2025

Document Number:

720900287

FIELD INSPECTION FORM

Loc ID 337322 Inspector Name: St John, William (Cal) 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: 10699
Name of Operator: OWN RESOURCES OPERATING LLC
Address: 305 S RIDGE STREET #6279
City: BRECKENRIDGE State: CO Zip: 80424

Findings:

17 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
284908	WELL	PR	05/30/2006	GW	125-10055	P.BROPHY 34-29 4N46W	PR

General Comment:

Inspector completed Follow-up audit 11/26/2025 as required by FIR to ensure corrective actions taken by Operator adequately address and comply with rule requirements cited in 07/11/2025 FIR document number 698603831. Operator has submitted FIRR. All corrective actions identified in FIR has been completed. This field audit will include audit of the scout card, related documents and the location.

Location			
Lease Road:			
Type	Access		
comment:	Two track off maintained County Road. Active agricultural cropland with seasonal access to well location.		
Corrective ActionL			Date:
Overall Good: <input type="checkbox"/>			
Signs/Marker:			
Type	BATTERY		
Comment:	Lease sign posted at remote Gas Meter Run.		
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: _____
Good Housekeeping:			
Type	OTHER		
Comment:	Black poly line containing location power for removed Pump Jack outside wellhead fencing.		
Corrective Action:			Date:
Overall Good: <input type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	OTHER		
Comment:	Stock panel fencing around surface equipment at remote gas metering location.		
Corrective Action:			Date:
Type	WELLHEAD		
Comment:	Welded steel tube barrier around surface equipment at well location.		
Corrective Action:			Date:
Equipment:			
Type: Flow Line	# 1		corrective date
Comment:	Flowline riser at wellhead with valve and plug.		
Corrective Action:			Date:
Type: Gas Meter Run	# 1		

Comment:	Remote Gas Meter Run located on CR & Access at shared gathering location. Digital Gas Meter Run. Meter Calibration/Test Log dated 4-15-25. Well Inlet Valve open. Gas Outlet Valve open.		Date:
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:	Bradenhead plumbed to surface. Corrective action completed.		Date:
Corrective Action:			Date:
Type: Dehydrator	# 1		
Comment:	Dehydrator (Drip Bottle) on gas meter run inlet.		Date:
Corrective Action:			Date:
Type: Other	# 1		
Comment:	Shared Remote Gas Meter Shed.		Date:
Corrective Action:			Date:
Type: Ancillary equipment	# 1		
Comment:	Wellhead. Casing production. Rods and tubing removed from the wellbore. Casing valve open.		Date:
Corrective Action:			Date:

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 284908 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: No COA's.

Corrective Action: _____

Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____

Date: _____

Comment: _____

Corrective Action: _____

Date: _____

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Inspected Facilities

Facility ID: 284908 Type: WELL API Number: 125-10055 Status: PR Insp. Status: PR

Producing Well

Comment: Casing valve open. Gas Meter Run Valves: Well inlet valve open, Gas outlet valve open.
Electronic Well File reflects last Production/Status reported 9/1/2025 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:

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
720900329	Audit photos.	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7357004