

**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:

01/26/2026

Submitted Date:

01/26/2026

Document Number:

719001219

FIELD INSPECTION FORM

Loc ID 333412 Inspector Name: GARCIA, CHARLES 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: 10133
Name of Operator: HILCORP ENERGY COMPANY
Address: P O BOX 61229
City: HOUSTON State: TX Zip: 77208

Findings:

- 11 Number of Comments
- 1 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 |
|------------------|-------|---------------------------------------|-------------|
| 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 |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|
| 215068 | WELL | PR | 11/30/2004 | CBM | 067-06673 | SCHALLES -A- 1 | PR |
| 292003 | WELL | PR | 07/01/2011 | CBM | 067-09387 | FLAGG 6-3 | PR |

General Comment:

Inspection Report Summary
On 1/26/26 | Inspector Charles Garcia conducted an on-site inspection.
Location: FLAGG 6-3, SCHALLES A #1
API# 067-09387
API# 067-09387
Operator: HILLCORP ENERGY COMPANY
County: LaPlata
GATE CAMB0 7708

Location

Overall Good:

| | | | |
|----------------------|----------------------------|-------|--|
| Signs/Marker: | | | |
| Type | OTHER | | |
| Comment: | LOCATION SIGN AT ENTERANCE | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment: 505-324-5170
911 EMERGENCY

Corrective Action: _____ Date: _____

Overall Good:

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment: _____

Multiple Spills and Releases?

| | | | |
|--------------------|---------------|-------|--|
| Fencing/: | | | |
| Type | PUMP JACK | | |
| Comment: | SOUND WALLS | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | ALL DEADMEN UNMARKED | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Vertical Heated Separator | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Other | # 2 | | |
| Comment: | METER HOUSES CALIBRATION IN COMPLIANCE | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 2 | | |

| | | | |
|---------------------------|--|--|------------------|
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Other | # 2 | | |
| Comment: | WELLHEADS | | |
| Corrective Action: | | | Date: |
| Type: Prime Mover | # 2 | | |
| Comment: | GAS | | |
| Corrective Action: | | | Date: |
| Type: Flow Line | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Bradenhead | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 4 | | |
| Comment: | 2 TELEMETRY EQUIPMENT 2 LUBE OIL CONTAINERS FOR PTIME MOVERS 1 WITH SPILL PREVENTION 1 WITHOUT SEE LOCATION PICTURES | | |
| Corrective Action: | Implement or modify BMPs for improved material handling and spill prevention. Comply with rule 1002.f | | Date: 01/29/2026 |

Venting:

| | | | |
|--------------------|--|--|-------|
| Yes/No | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Flaring:

| | | | |
|--------------------|--|--|-------|
| Type | | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

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 |
|--------------|-------------------|---|
| 719001220 | LOCATION PICTURES | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7427382 |