

**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:

02/10/2026

Submitted Date:

02/10/2026

Document Number:

716301950

FIELD INSPECTION FORM

Loc ID 333402 Inspector Name: Beardslee, Tom 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: 10758
Name of Operator: OGRIS OPERATING LLC
Address: PO BOX 53467
City: MIDLAND State: TX Zip: 79710

Findings:

- 10 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
B WARD, GIENA		gward@ogrisop.com	All Inspections
BACA, DAVE	719-859-4066	dbaca@ogrisop.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
268	WELL	PR	07/09/2008	CBM	071-09487	GOLDEN EAGLE 33-12	PR
296599	PIT		06/18/2008		-	GOLDEN EAGLE 33-12	

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: _____

Good Housekeeping:

Type	OTHER		
Comment:	PHOTO 5: Area of impacted soil near wellhead.		
Corrective Action:	Conduct maintenance on equipment, cleanup stained material and review self inspection processes. COMPLY WITH RULE 1002.(2).D.		Date: 02/27/2026

Overall Good:

Spills:

Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:

Type			corrective date
Type: Ancillary equipment	# 1		
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: Other	# 1		
Comment:	30 bbl produced water/used oil tank		
Corrective Action:			Date:
Type: Vertical Separator	# 1		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:	is accessible		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:
Type: Progressive Cavity	# 1		
Comment:			
Corrective Action:			Date:

Type: Compressor	# 1	
Comment:	PHOTO 4: Vacuum pump observed on well without ECMC approval.	
Corrective Action:	Provide ECMC with documentation showing approval of use of vacuum pump.	Date: 02/27/2026

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 268 Type: WELL API Number: 071-09487 Status: PR Insp. Status: PR

Producing Well

Comment: pr

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 10/08/2025 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

Facility ID: 296599 Type: PIT API Number: - Status: _____ Insp. Status: _____

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
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Type: Produced Water Lined: NO Pit ID: 296599 Lat: 37.124510 Long: -104.898100

Reference Point: _____ Other: _____ Length: _____ Width: _____

Lining:

Liner Type: _____ Liner Condition: _____

Comment:

Corrective Action

Date: _____

Fencing:

Fencing Type: None Fencing Condition: _____

Comment:

Corrective Action

Date: _____

Netting:

Netting Type: _____ Netting Condition: _____

Comment:

Corrective Action

Date: _____

Anchor Trench Present: NO Oil Accumulation: NO 2+ feet Freeboard: YES

Comment:

Corrective Action

Date: _____

Permit:	Facility ID	Permit Num	Expiration Date
	296599	2017115	

ECMC Comments

Comment	User	Date
<p>ECMC Inspection Report Summary Date: 2/10/2026 Time: 11:30 Operator: Ogris Operating LLC.10758 Location: Golden Eagle 33-12 API# 05-071-09487 County: Las Animas County. While there, I ECMC staff performed a field audit of the scout card, related documents and the location. During the audit the following possible compliance issues were observed: PHOTO 4: Vacuum pump observed on well without ECMC approval. Provide ECMC with documentation showing approval of use of vacuum pump. Ca date 2-27-2026. PHOTO 5: Area of impacted soil near wellhead. Conduct maintenance on equipment, cleanup stained material and review self inspection processes. COMPLY WITH RULE 1002,.(2).D. ca date 2-27-2026.A follow-up on this site inspection needs to be conducted to ensure the Compliance issues have been corrected to comply with ECMC rules.</p>	beardslt	02/10/2026

Attached Documents

You can go to ECMC Images (<https://ecmc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
716301954	insp. photos	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7445440