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| 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>04/23/2026</u> Submitted Date: <u>04/23/2026</u> Document Number: <u>719001817</u> |
| FIELD INSPECTION FORM | | | |

| | | | |
|---|--|---|-------------------|
| Loc ID: <u>333907</u> | Inspector Name: <u>GARCIA, CHARLES</u> | On-Site Inspection <input type="checkbox"/> | 2A Doc Num: _____ |
| Operator Information: ECMC Operator Number: <u>10749</u> Name of Operator: <u>SIMCOE LLC</u> Address: <u>1199 MAIN AVE SUITE 101</u> City: <u>DURANGO</u> State: <u>CO</u> Zip: <u>81301</u> | | | |
| Status Summary: <input type="checkbox"/> THIS IS A FOLLOW UP INSPECTION <input type="checkbox"/> FOLLOW UP INSPECTION REQUIRED <input checked="" type="checkbox"/> NO FOLLOW UP INSPECTION REQUIRED | | | |
| Findings: 15 Number of Comments 0 Number of Corrective Actions <input type="checkbox"/> 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 |
| | | ehsinspections@machnr.com | |

| Inspected Facilities: | | | | | | | |
|------------------------------|------|--------|-------------|------------|-----------|----------------|-------------|
| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
| 265271 | WELL | PR | 04/30/2021 | CBM | 067-08769 | BARNES-LEIDY 2 | PR |
| 297420 | WELL | PR | 01/01/2023 | CBM | 067-09613 | BARNES-LEIDY 4 | PR |

General Comment:

Inspection Report Summary
 On 4/23/26 | Inspector Charles Garcia conducted an on-site inspection.
 Location: BARNES LEIDY 2, BARNES LEIDY 4
 Operator: Simcoe LLC
 API#: 067-08769
 API#: 067-09613
 County: LaPlata
 All prior CA's still stand

Location

Overall Good:

| | | | |
|----------------------|---------------------------|-------|--|
| Signs/Marker: | | | |
| Type | OTHER | | |
| Comment: | LOCATION SIGN AT ENTRANCE | | |
| Corrective Action: | | Date: | |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | PRODUCED WATER TANK | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|--|-------|--|
| Emergency Contact Number: | | | |
| Comment: | Contact # 970-247-6916 Emergency #911 | | |
| Corrective Action: | | Date: | |

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|---|-------|--|
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | PRODUCED WATER TANK METER HOUSES TELEMETRY EQUIPMENT CATTLE PANELS | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | Date: | |
| Type | PUMP JACK | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | Date: | |
| Type | SEPARATOR | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|--|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Ancillary equipment | # 5 | | |
| Comment: | TELEMETRY EQUIPMENT 4 ELECTRIC PANELS | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 2 | | |
| Comment: | | | |

| | | | |
|-----------------------------------|--|-------|--|
| Corrective Action: | | Date: | |
| Type: Horizontal Heated Separator | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Pump Jack | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Prime Mover | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Bird Protectors | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Other | # 2 | | |
| Comment: | WELLHEADS | | |
| Corrective Action: | | Date: | |
| Type: Flow Line | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Other | # 2 | | |
| Comment: | METER HOUSES CALIBRATION IN COMPLIANCE | | |
| Corrective Action: | | Date: | |
| Type: Bradenhead | # 2 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|----------------------|---|----------|-----------|---------|--------|
| PRODUCED WATER | 1 | OTHER | PBV STEEL | | |
| Comment: 95 BBL TANK | | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | |
|------------------|----------|
| Condition | Adequate |
| Other (Content) | |
| Other (Capacity) | |
| Other (Type) | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |
| Comment: | | | | |
| Corrective Action: | | | | Date: |

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

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

Inspected Facilities

Facility ID: 265271 Type: WELL API Number: 067-08769 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 08/18/2025 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 1 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

Corrective Action:

Date:

Facility ID: 297420 Type: WELL API Number: 067-09613 Status: PR Insp. Status: PR

Producing Well

Comment: PR

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 08/18/2025 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

Corrective Action:

Date:

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 | | | |
| Check Dams | Pass | | | | | |
| Gravel | Pass | Gravel | Pass | | | |

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

ECMC Comments

| Comment | User | Date |
|-----------------|-----------|------------|
| NO ISSUES FOUND | garciacr1 | 04/23/2026 |

Attached Documents

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

| Document Num | Description | URL |
|--------------|-------------------|---|
| 719001818 | LOCATION PICTURES | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7525580 |