

**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:

04/20/2026

Submitted Date:

04/24/2026

Document Number:

720900991

FIELD INSPECTION FORM

Loc ID 415704 Inspector Name: Vance, Jessie 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:

19 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 |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 415800 | WELL | PR | 05/20/2010 | GW | 125-11750 | FIX 32-12 | PR |

General Comment:

[This is a training developmental inspection/audit. The scout card and forms have been reviewed.](#)

Location

| | | | |
|--------------------|-------------------|-------|--|
| Lease Road: | | | |
| Type | Access | | |
| comment: | Trail through CRP | | |
| Corrective Action: | | Date: | |

Overall Good:

| | | | |
|----------------------|-------------------------|-------|--|
| Signs/Marker: | | | |
| Type | OTHER | | |
| Comment: | Lease sign at meter run | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Lease sign at wellhead | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|----------|-------|--|
| Emergency Contact Number: | | | |
| Comment: | Adequate | | |
| Corrective Action: | | Date: | |

Overall Good:

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

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|--|-------|--|
| Fencing/: | | | |
| Type | OTHER | | |
| Comment: | Steel panels around meter run | | |
| Corrective Action: | | Date: | |
| Type | WELLHEAD | | |
| Comment: | Steel panels around wellhead and equipment | | |
| Corrective Action: | | Date: | |

| | | | |
|--------------------------|-----------------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Prime Mover | # 1 | | |
| Comment: | Gas engine | | |
| Corrective Action: | | Date: | |
| Type: Gas Meter Run | # 1 | | |
| Comment: | Off site meter run | | |
| Corrective Action: | | Date: | |
| Type: Vertical Separator | # 1 | | |
| Comment: | 50% buried VGS at meter run | | |
| Corrective Action: | | Date: | |

| | | | |
|---------------------------|-------------------------------|--|-------|
| Type: Ancillary equipment | # 1 | | |
| Comment: | Gas scrubber | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 1 | | |
| Comment: | Telemetry equipment | | |
| Corrective Action: | | | Date: |
| Type: Pump Jack | # 1 | | |
| Comment: | Jensen unit | | |
| Corrective Action: | | | Date: |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | Anchors need marked | | |
| Corrective Action: | | | Date: |
| Type: Bradenhead | # 1 | | |
| Comment: | Bradenhead plumbed to surface | | |
| Corrective Action: | | | Date: |

Venting:

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

Flaring:

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

Location Construction

Location ID: 415800 CDP: _____

Comment:

Corrective Action: Date: _____

Form 2A COAs:

Comment:

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: 415800 Type: WELL API Number: 125-11750 Status: PR Insp. Status: PR

Producing Well

Comment: Producing, Off location meter run, meter calibrated 7/22/25, meter run 2110 ft SE of wellhead

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 01/30/2026 Annual Brhd Completed? Yes

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

End Surf Csg Pressure: 0

Comment: Forms are up to date

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: DRY LAND

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____ Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____

Comment _____

Corrective Action _____ Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____ Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____ Date _____

1003a. Waste and Debris removed? Pass

Comment _____

Corrective Action _____ Date _____

Unused or unneeded equipment onsite? Pass

Comment _____

Corrective Action _____ Date _____

Pit, cellars, rat holes and other bores closed? Pass

Comment _____

Corrective Action _____ Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____ Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____
 1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
 Cuttings management: _____
 1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
 Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT
 TRANSECT RESULTS OF DISTURBED AREA% _____
 TRANSECT RESULTS OF REFERENCE AREA% _____
 TOTAL % OF DESIRABLE VEGETATION COVER _____
 VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____

Comment _____

Corrective Action _____

Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: DRY LAND _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT
 TRANSECT RESULTS OF DISTURBED AREA% _____
 TRANSECT RESULTS OF REFERENCE AREA% _____
 TOTAL % OF DESIRABLE VEGETATION COVER _____
 VEGETATIVE COVER _____

Comment: _____

Corrective Action: _____

Date _____

Overall Final Reclamation _____ Well Release on Active Location Multi-Well Location

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

Attached Documents

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

| Document Num | Description | URL |
|--------------|-------------------|---|
| 720900992 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7526029 |