

**FORM
INSP**Rev
X/20**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

01/03/2022

Submitted Date:

01/13/2022

Document Number:

688311846**FIELD INSPECTION FORM**Loc ID 411781 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10699Name of Operator: OWN RESOURCES OPERATING LLCAddress: 38 PALMER CREST CTCity: SPRING State: TX Zip: 77381**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☐ NO FOLLOW UP INSPECTION REQUIRED

Findings:11 Number of Comments2 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
Jones, Greg	970-332-3585	greg.jones@ownresources.com	
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
301952	WELL	PR	04/05/2010	GW	125-11680	MILLER 22-08 1N44W	PR

General Comment:

Routine Field Inspection

LocationOverall Good: ☒

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	TANK LABELS/PLACARDS		
Comment:	No tank label. There were liquids in tank.		
Corrective Action:	Install sign to comply with Rule 605.h.	Date:	02/15/2022

Emergency Contact Number:

Comment: 970-332-3585

Corrective Action:

Date: _____

Good Housekeeping:

Type	WEEDS		
Comment:	See attached photos of tumble weeds that have blown into the battery location and are also on the outside of the fencing. There is a potential for this causing a safety hazard and there is a heated vertical treater in the shed.		
Corrective Action:	602c. Operators are responsible for ensuring that operations are conducted with due regard for the safety of employees, for the preservation and conservation of property, and for protecting and minimizing adverse impacts to public health, safety, welfare, the environment, and wildlife resources. 610k. Control of Fire Hazards. Any material not in use that might constitute a fire hazard will be removed a minimum of 25 feet from the wellhead(s), Tanks, and separator(s)	Date:	01/19/2022

Overall Good: ☐

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

☐ Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	
Type	TANK BATTERY		
Comment:			
Corrective Action:		Date:	

Equipment:			corrective date
Type: Vertical Separator	# 3		
Comment:	one is heated		

Corrective Action:		Date:	
Type: Gas Meter Run	# 2		
Comment:	digital, 1/13/2021 calibration card is present		
Corrective Action:		Date:	
Type: Bradenhead	# 1		
Comment:	2021 Form 17 is in the COGCC database.		
Corrective Action:		Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	FIBERGLASS AST		,
Comment:	no tank labels/not legible				
Corrective Action:				Date:	

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			
Comment:				
Corrective Action:			Date:	

Wells Served By Facilities Above

API Number
125-11680
125-11681

AirsID

API Number	AirsID
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Location Construction

Location ID: 301952 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: No COAs.

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:	301952	Type:	WELL	API Number:	125-11680	Status:	PR	Insp. Status:	PR
Producing Well									
Comment:	pr 11/1/2021 production is reported to COGCC database.								
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					

Comment: [Well in in center pivot corn stalk field, battery in on edge of field and near CR CC](#)

Corrective Action:

Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
688311903	OWN Resources Miller 22-08 1N44W	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5633188