

**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:

08/07/2023

Submitted Date:

08/09/2023

Document Number:

698600899

FIELD INSPECTION FORMLoc ID 336954 Inspector Name: St John, William (Cal) On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 66190

Name of Operator: OMIMEX PETROLEUM INC

Address: 2501 HARWOOD ST STE 1238

City: DALLAS State: TX Zip: 75201

Status Summary:☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**

22 Number of Comments

8 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 |
|---------------------|-------|----------------------------------|-------------------------|
| , Engineering | | dnr_cogccengineering@state.co.us | |
| Ferrin, Jeremy | | jeremy.ferrin@state.co.us | Enforcement Officer |
| Quint, Craig | | craig.quint@state.co.us | E Compliance Supervisor |
| Kirschner, Steven | | steven.kirschner@state.co.us | Enforcement Supervisor |
| Chambers, Kit | | Kchambers@ravenwoodlabs.com | 7/16/2023 |
| Pesicka, Conor | | conor.pesicka@state.co.us | |
| Leonard, Mike | | mike.leonard@state.co.us | Compliance Manager |
| McGlaughlin, Dennis | | Dmac@ravenwoodlabs.com | 7/16/2023 |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------------|-------------|
| 280916 | WELL | PR | 03/01/2022 | GW | 125-09609 | SCHNELLER 9-22-5-45 | PR |

General Comment:

Routine Inspection.

| Location | | | | |
|---|--|--------|--|------------------|
| Lease Road: | | | | |
| Type | Access | | | |
| comment: | Two track off maintained county road. Two track has not been maintained. | | | |
| Corrective Action | Repair and maintain lease road to comply with rule 603.l. | | | Date: 09/09/2023 |
| Overall Good: <input type="checkbox"/> | | | | |
| Signs/Marker: | | | | |
| Type | WELLHEAD | | | |
| Comment: | Well sign at well location. | | | |
| Corrective Action: | | | | Date: |
| Type | OTHER | | | |
| Comment: | Well sign at the remote Meter Shed. | | | |
| Corrective Action: | | | | Date: |
| Emergency Contact Number: | | | | |
| Comment: | Emergency contact #877-425-4882 posted on well sign at remote Gas Meter Run is invalid and appears to be disconnected or no longer in service. | | | |
| Corrective Action: | Install sign to comply with Rule 605.a. | | | Date: 09/09/2023 |
| Good Housekeeping: | | | | |
| Type | WEEDS | | | |
| Comment: | Well location has vegetation growing inside fencing. Remote Gas Meter Run site is over grown with vegetation. | | | |
| Corrective Action: | Comply with Rule 606. | | | Date: 08/17/2023 |
| Overall Good: <input type="checkbox"/> | | | | |
| Spills: | | | | |
| Type | Area | Volume | | |
| In Containment: No | | | | |
| Comment: <input type="text"/> | | | | |
| <input type="checkbox"/> Multiple Spills and Releases? | | | | |
| Equipment: | | | | |
| Type: Other | # 1 | | | corrective date |
| Comment: | Metal Meter Shed at remote Gas Meter Run. Meter shed has been blown 3/4 off supports and is leaning back. Tension on the flowlines. | | | |
| Corrective Action: | Inspect and service the wellhead, tree, and related surface control equipment to comply with Rule 603.c.(14). | | | Date: 08/08/2023 |
| Corrective Action dated accelerated due to immediate need to initiate repairs. | | | | |
| Type: Gas Meter Run | # 1 | | | |
| Comment: | Remote Gas Meter Run located at fence line approximately 550' SE of well towards field overlap/CR BB. | | | |
| Gas Meter Run. Chart in Meter Box dated 12-1-22. Meter Calibration/Test Log dated 7-10-20. Well Inlet Valve closed. Gas Outlet Valve closed. Water Outlet valve closed. | | | | |
| Corrective Action: | Calibrate gas metering equipment annually to comply with rule 430.d.(1). | | | Date: 09/09/2023 |
| Type: Ancillary equipment | # 1 | | | |

| | | | | |
|---------------------------|--|--|-------|------------|
| Comment: | Wellhead. Rods removed. Tubing in wellbore. Tubing valve closed, not connected. Casing valve maybe closed (Bad valve). | | | |
| Corrective Action: | Inspect and service the wellhead, tree, and related surface control equipment to comply with Rule 603.c.(14). | | Date: | 08/25/2023 |
| Type: Bradenhead | # 0 | | | |
| Comment: | Bradenhead inaccessible or not visible. | | | |
| Corrective Action: | Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2). | | Date: | 08/20/2023 |
| Type: Prime Mover | # 0 | | | |
| Comment: | Removed. | | | |
| Corrective Action: | | | Date: | |
| Type: Vertical Separator | # 1 | | | |
| Comment: | Inside Meter Shed. | | | |
| Corrective Action: | | | Date: | |
| Type: Ancillary equipment | # 1 | | | |
| Comment: | Pump Jack Power and Control Panel. | | | |
| Corrective Action: | | | Date: | |
| Type: Pump Jack | # 0 | | | |
| Comment: | Removed. | | | |
| Corrective Action: | | | Date: | |

Venting:

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

Flaring:

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

Inspected FacilitiesFacility ID: 280916 Type: WELL API Number: 125-09609 Status: PR Insp. Status: PR**Idle Well**Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____

Comment: Rods removed. Tubing in wellbore. Tubing valve closed, not connected. Casing valve maybe closed, bad valve. Meter Shed is leaning backwards and 3/4 of the way off supports. Gas Meter Run Valves: Well inlet valve closed, Gas outlet valve closed, Water outlet valve closed.

Electronic Well File reflects last Production/Status reported 8/1/2022 and Well Status as PR. Based on current valve settings the well is SI.

Review of monthly operations records indicate operator is delinquent in submitting monthly operations reports.

Corrective Action: Submit required Form 7(s) to COGCC per rule 413.Date: 09/09/2023

Reclamation - Storm Water - Pit

Storm Water:

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| | | | | | | |

Comment: No stormwater issues noted at time of inspection.

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 |
|--------------|-------------------|---|
| 698600913 | Inspection Photos | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6213556 |