

**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:

08/21/2023

Submitted Date:

08/21/2023

Document Number:

695108577**FIELD INSPECTION FORM**Loc ID 334424 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**OGCC Operator Number: 10705Name of Operator: EVERGREEN NATURAL RESOURCES LLCAddress: 1875 LAWRENCE ST STE 1150City: DENVER State: CO Zip: 80202**Status Summary:**☐ THIS IS A FOLLOW UP INSPECTION☒ FOLLOW UP INSPECTION REQUIRED☐ NO FOLLOW UP INSPECTION REQUIRED**Findings:**6 Number of Comments1 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
Distribution, Evergreen	719-846-7898	cogcc.evergreen@enrllc.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
286682	WELL	PR	10/03/2008	CBM	071-08977	MAUI 13-31 TR	PR

General Comment:

LocationOverall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type

WEEDS

Comment:

PHOTO 3: WELLHEAD AND EQUIPMENT/ WEEDS AROUND WELLHEAD.

Corrective Action:

MAINTAIN WEEDS ON LOCATION PER RULE 606.

Date: 09/21/2023

Overall Good: ☐**Spills:**

Type

Area

Volume

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Equipment:**

corrective date

Type: Ancillary equipment

1

Comment:

Corrective Action:

Date:

Type: Vertical Separator

1

Comment:

Corrective Action:

Date:

Type: Bradenhead

1

Comment:

IS ACCESSABLE

Corrective Action:

Date:

Type: Deadman # & Marked

5

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: Vertical Separator

1

Comment:

Corrective Action:

Date:

Type: Prime Mover

1

Comment:

Corrective Action:

Date:

Type: Compressor

1

Comment:	FORM 4 IS ON FILE			
Corrective Action:			Date:	
<u>Venting:</u>				
Yes/No	NO			
Comment:				
Corrective Action:			Date:	
<u>Flaring:</u>				
Type				
Comment:				
Corrective Action:			Date:	

Inspected FacilitiesFacility ID: 286682 Type: WELL API Number: 071-08977 Status: PR Insp. Status: PR**Producing Well**Comment: Corrective Action: Date: **BradenHead**Date of Last Brhd Test: 10/20/2011Annual Brhd Completed? Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: End Surf Csg Pressure: 0Comment: FORM 4 IS ON FILECorrective Action: Date: **Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
403503944	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6226736
695108578	INSP. PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6226724