

**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:

10/10/2024

Submitted Date:

10/14/2024

Document Number:

693807796

FIELD INSPECTION FORM

Loc ID: 316810 Inspector Name: BROWNING, CHUCK On-Site Inspection: 2A Doc Num: _____

Status Summary:

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

Findings:

- 8 Number of Comments
- 1 Number of Corrective Actions
- Corrective Action Response Requested

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

Operator Information:

ECMC Operator Number: 10841
Name of Operator: AMERICAN HELIUM OPERATING LLC
Address: 600 TRAVIS STREET SUITE 5050
City: HOUSTON State: TX Zip: 77002

Contact Information:

Contact Name	Phone	Email	Comment
Hartman, Laura		lhartman@blm.gov	
Lapham, Ken	979-877-4951	klapham@americanhelium.us	All Inspections
Labowskie, Steve		steve.labowskie@state.co.us	
Browning, Chuck	970-433-4139	chuck.browning@state.co.us	Field Inspector

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
232871	WELL	SI	06/01/2024	GW	113-06060	COCKLEBUR DRAW UNIT 3	SI

General Comment:

ECMC staff performed Optical Gas Imaging Survey inspection on 10/10/2024. Issues were found requiring corrective action. See inspection text and photos for details. Any Corrective Actions from previous inspections that have not been addressed are still applicable.

Location

Lease Road:			
Type	Access		
comment:			
Corrective ActionL			Date:
Type	Main		
comment:			
Corrective ActionL			Date:

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:			
Corrective Action:			Date:

Emergency Contact Number:			
Comment:	435-631-2239		
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
Type	WELLHEAD		
Comment:	Pipe barricade		
Corrective Action:			Date:

Equipment:			corrective date
Type: Gathering Line	# 1		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:

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

Flaring:			
Type			

Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 232871 Type: WELL API Number: 113-06060 Status: SI Insp. Status: SI

Idle Well

Purpose: Shut In Temporarily Abandoned Reminder: _____

Comment: Well shut in 4/1/2024

Corrective Action: _____ Date: _____

BradenHead

Date of Last Brhd Test: 05/31/2023 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 3 Fluid Type: NONE

End Surf Csg Pressure: 0

Comment: No annual bradenhead test Form 17 on file. 11/14/2024

Corrective Action: Submit Form 17 as directed by Rule 419.c Date: _____

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

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			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

