

**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:

03/31/2025

Submitted Date:

03/31/2025

Document Number:

715501477

FIELD INSPECTION FORM

Loc ID 311770 Inspector Name: Burchett, Kirby 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: 7125
Name of Operator: BEEMAN OIL & GAS INC
Address: 13635 E 104TH AVENUE STE 400
City: COMMERCE CITY State: CO Zip: 80022

Findings:

- 13 Number of Comments
- 7 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
Pate, James	(720) 377-3366	jspconcrete@yahoo.com	
Lawton, Lisa	(970) 846-4639	lisa@beemanoil.com	
Galloway, Kelly	(970) 210-2896	kgalloway.werc@gmail.com	
Engineering, ECMC		dnr_cogccengineering@state.co.us	
Beasley, Nolan		nolan.beasley@state.co.us	
Wilson, Justin	(970) 878-3825	jrwilson@blm.gov	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
160013	UIC Disposal	AC	09/06/2018		-	Elk Springs Unit 4	AC
223471	WELL	IJ	08/17/2023	DSPW	081-06837	ELK SPRINGS UNIT 4	IJ

General Comment:

ECMC Inspection Report Summary

On Monday, 03/31/2025, Inspector Kirby Burchett, conducted a routine field inspection at Beeman Oil & Gas Inc. on the Elk Springs Unit 4 well, Location #311770, in Moffat County, Colorado.

This location is within or in close proximity to a Colorado Parks and Wildlife (CPW) District with High Priority, NSO, Density, and Other Consultation Habitat regulations.

Any Corrective Actions from previous Inspections are still applicable.

While there during normal operations the following compliance issues were observed:

1. Debris.
2. No well sign.
3. Unused equipment.
4. No spill containment.
5. Equipment open to wildlife.
6. Oily waste and stained soils.

Refer to Inspection Photos for observed compliance issues.

A follow up on this site inspection will be conducted to ensure all compliance issues have been corrected to comply with ECMC rules.

Location			
Overall Good: <input type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:	No sign		
Corrective Action:	When no associated Tank battery is present at the Oil and Gas Location, the following information is required on the Well sign: Name of the Operator; Telephone number at which the Operator can be reached at all times; Telephone number for local emergency services (911 where available); The public road used to access the Well; Well name(s) and API number(s); The legal location of the Well(s) including the quarter/quarter section.		Date: <u>05/01/2025</u>
Emergency Contact Number:			
Comment:	<u>970-210-2896</u>		Date: _____
Corrective Action:			
Good Housekeeping:			
Type	WEEDS		
Comment:	Maintain noxious weed control on all disturbed and reclaimed areas as a result of Oil & Gas activities including access roads.		
Corrective Action:			Date: _____
Type	DEBRIS		
Comment:	Random debris		
Corrective Action:	All excess materials, rubbish, supplies, trash, or other waste material will be properly contained until removed from the Oil and Gas Location. At no time will debris be placed or remain on the ground.		Date: <u>04/07/2025</u>
Type	UNUSED EQUIPMENT		
Comment:	Equipment not in use		
Corrective Action:	All equipment not hooked up or out of service will be removed from location.		Date: <u>04/16/2025</u>
Overall Good: <input type="checkbox"/>			
Spills:			
Type	Area	Volume	
Crude Oil	Tank		
Comment:	Oily waste and stained soil		
Corrective Action:	Remove and properly dispose of oily waste, stained and/or contaminated soil.		Date: <u>04/16/2025</u>
PW/CO	WELLHEAD		
Comment:	Several areas of stained soil		
Corrective Action:	Remove and properly dispose of oily waste, stained and/or contaminated soil.		Date: <u>04/16/2025</u>
In Containment: No			
Comment:			
<input checked="" type="checkbox"/> Multiple Spills and Releases?			
Equipment:			
			corrective date
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date: _____
Type: Bradenhead	# 1		

Comment:			
Corrective Action:			Date:
Type: Other	# 1		
Comment:	Wellhead tree		
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	STEEL AST		
Comment:	Rectangular open top lacking wildlife protection				
Corrective Action:	All open-topped Tanks will be equipped with screens or other appropriate equipment to prevent entry by wildlife, including birds and bats.			Date:	04/19/2025

Paint

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

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Comment:	No secondary containment				
Corrective Action:	Install berms or other secondary containment devices.			Date:	05/01/2025

Venting:

Yes/No	NO		
Comment:			
Corrective Action:			Date:

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 160013 Type: UIC Disposal API Number: - Status: AC Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: _____
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: _____
 Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ Date: _____

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

Facility ID: 223471 Type: WELL API Number: 081-06837 Status: IJ Insp. Status: IJ

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: ENRD
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/27/2023
 Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: Well has been disconnected. Several pieces of equipment on location.
 Rig work done? Form 42: Notice of move in / rig up?
 New MIT required if repairs have been made.

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: _____ Tbg psi: _____ Csg psi: _____ BH psi: _____

Insp. Status: _____

Comment: _____

Corrective Action: _____ 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

Comment: Operator is responsible for maintaining Best Management Practices (BMPs) to control vehicle tracking and potential sediment discharges from operational roads, well pads, and other unpaved surfaces.

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
404147686	INSPECTION SUBMITTED	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6984875
715501478	Inspection Photos	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=6984868