

**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:

07/08/2025

Submitted Date:

07/08/2025

Document Number:

698707697**FIELD INSPECTION FORM**Loc ID 307538 Inspector Name: Serna, Abe On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**ECMC 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 Comments0 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 |
|--------------|--------------|----------------------------|---------|
| , | 719-846-7898 | cogcc.evergreen@enrllc.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|
| 217798 | WELL | PR | 05/01/2023 | CBM | 071-06577 | CHIPMUNK 13-18 | PR |

General Comment:[Wellsite Inspection](#)

LocationOverall Good: ☒**Signs/Marker:**

| | | | |
|--------------------|--------------------------|-------|--|
| Type | OTHER | | |
| Comment: | Well sign on meter house | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

| | | |
|--------------------|--|-------------|
| Comment: | | Date: _____ |
| Corrective Action: | | |

Overall Good: ☒**Spills:**

| | | | | |
|------|------|--------|--|--|
| Type | Area | Volume | | |
|------|------|--------|--|--|

In Containment: No

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

| | | | |
|---------------------------|---|-------|-----------------|
| | | | corrective date |
| Type: Bradenhead | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Deadman # & Marked | # 4 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Ancillary equipment | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |
| Type: Vertical Separator | # 1 | | |
| 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: Pump Jack | # 1 | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

| Inspected Facilities | | | | | | | | | |
|-------------------------|----------------------------|-------|------------------------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 217798 | Type: | WELL | API Number: | 071-06577 | Status: | PR | Insp. Status: | PR |
| Producing Well | | | | | | | | | |
| Comment: | PR | | | | | | | | |
| Corrective Action: | | | | Date: | | | | | |
| BradenHead | | | | | | | | | |
| Date of Last Brhd Test: | 09/15/2010 | | Annual Brhd Completed? | | | | | | |
| Last Brhd Test Results | Initial Surf Csg Pressure: | 0 | Fluid Type: | | | | | | |
| | End Surf Csg Pressure: | 0 | | | | | | | |
| Comment: | Form 4 on file | | | | | | | | |
| 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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Ditches | Pass | Culverts | Pass | | | |

Comment:

Corrective Action:

Date: _____

Pits: ☐ NO SURFACE INDICATION OF PITType: Produced WaterLined: NO

Pit ID:

Lat:

Long:

Reference Point: _____

Other: _____

Length: _____

Width: _____

Lining:

Liner Type:

Liner Condition:

Comment:

Corrective Action

Date:

Fencing:Fencing Type: None

Fencing Condition:

Comment:

Corrective Action

Date:

Netting:

Netting Type:

Netting Condition:

Comment:

Corrective Action

Date:

Anchor Trench Present:

Oil Accumulation:

2+ feet Freeboard:

Comment:

Corrective Action

Date:

ECMC Comments

| Comment | User | Date |
|------------------------------------|--------|------------|
| Routine Inspection | sernaa | 07/08/2025 |

Attached DocumentsYou can go to ECMC Images (<https://ecmc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|-------------|---|
| 698707698 | Photo | https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7133050 |