

**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:

07/10/2025

Document Number:

714300187

FIELD INSPECTION FORM

Loc ID 317973 Inspector Name: Brown, Kari 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: 31257
Name of Operator: FRITZLER RESOURCES INC
Address: P O BOX 114
City: FORT MORGAN State: CO Zip: 80701

Findings:

- 8 Number of Comments
- 6 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
Fritzler, Gene	(970) 867-9388	gfritzler@bresnan.net	All Inspections
Graber, Nikki		nikki.graber@state.co.us	
Ahmadian, Alexander		alexander.ahmadian@state.co.us	
Monk, Ryan		ryan.monk@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
485680	SPILL OR RELEASE	CL	12/19/2024		-	Production Tank	EI

General Comment:

This is an environmental inspection to determine progress on Spill ID/Remediation Project No 37591. Any corrective actions from previous inspections, NOAVs and/or conditions of approval from previous forms that have not been fully addressed are still applicable.

There were no operator or contract environmental personnel on location at the time of this field inspection.

Photos attached to document site conditions.

Location

Overall Good:

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Good Housekeeping:

Type	TRASH		
Comment:	Trash present in open excavation.		
Corrective Action:	Comply with good housekeeping Rule 606.	Date:	07/17/2025
Type	WEEDS		
Comment:	Weeds growing throughout location, including in and around the open excavation.		
Corrective Action:	Comply with Rule 606.	Date:	07/17/2025

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type			
Comment:	Fencing has fallen down surrounding the open excavation.		
Corrective Action:	Secure access to excavation in accordance with Rule 913.b.(5).B.i and ECMC Guidance 913.b.(5)B i-v. CA date from Insp Doc No 717100114.	Date:	03/21/2025

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
Comment:					
Corrective Action:					Date:

Paint

Condition	<input type="text"/>
Other (Content)	<input type="text"/>
Other (Capacity)	<input type="text"/>
Other (Type)	<input type="text"/>

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	The production tank and separator berms did not appear to have been compacted.			
Corrective Action:	Repair or install berms or other secondary containment devices per Rule 603.o. CA date from Insp Doc No 717100114.	Date:	04/06/2025	

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

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 485680 Type: SPILL OR API Number: - Status: CL Insp. Status: EI

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

Environmental

Spills/Releases:

Type of Spill: _____ Estimated Spill Volume: _____

Comment: Excavation remains open on location. No work has been performed on this spill since the previous inspection (02/24/2025 – Doc No 717100114).

Corrective Action: Per Form 27 Doc No 404032574 (Rem No 37591) Operator shall begin remedial excavation to remove the confirmed impacts at HSW#4 by April 18, 2025. Operator shall notify ECMC Area EPS personnel no less than 72 hours prior to any sampling or backfill at this location. Date: 04/18/2025

Reportable: _____ GPS: Lat _____ Long _____

Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well Complaint:

Lat _____ Long _____

DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters:

Sample Location: _____ Comment: _____

Spill/Remediation:

Comment: Quarterly reporting is required under Remediation Project # 37591. Operator is past due on quarterly reporting. The last Supplemental Form 27 was received on 3/29/2025 (Doc # 404143966) and was denied by ECMC On 4/29/2025 for altered laboratory analytical reports. Per Form comment Operator was required to resubmit a replacement form immediately.

Corrective Action: Operator shall submit a replacement Form 27 for Remediation Project # 37591 with stand alone and laboratory secured analytical. In accordance with Rule 913.e.(3), Operator will adopt and maintain a quarterly reporting schedule (90 days). Operator will maintain quarterly reporting until the site investigation is complete and the implementation schedule can be updated. Date: 04/29/2025

Emission Control Burner (ECB): _____

Comment:

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Attached Documents

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

Document Num	Description	URL
404275764	INSPECTION SUBMITTED	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7136949
714300188	Inspection Photos	https://ecmc.state.co.us/weblink/DownloadDocumentPDF.aspx?DocumentId=7136942