

**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:

07/06/2023

Submitted Date:

07/07/2023

Document Number:

712700372

**FIELD INSPECTION FORM**

Loc ID 306997 Inspector Name: Pattillo, Curtis 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:**

OGCC Operator Number: 10663  
Name of Operator: ENDURING RESOURCES LLC  
Address: 6300 S SYRACUSE WAY, SUITE 525  
City: CENTENNIAL State: CO Zip: 80111

**Findings:**

- 18 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**

**Contact Information:**

| Contact Name        | Phone | Email                             | Comment                            |
|---------------------|-------|-----------------------------------|------------------------------------|
| Huntington, Heather |       | hhuntington@enduringresources.com | <a href="#">All SW Inspections</a> |
| Walter, Kyle        |       | kwalter@enduringresources.com     | <a href="#">All SW Inspections</a> |
| Labowski, Steve     |       | Steve.labowski@state.co.us        | <a href="#">All SW Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name                  | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------------------|-------------|
| 293562      | WELL | PR     | 05/02/2019  | CBM        | 067-09424 | STATE OF COLORADO<br>34.5 35-2 | PR          |

**General Comment:**

[SW Compliance Specialist Curtis Pattillo conducted a field inspection of the access road and well location.](#)

**Location**

Overall Good:

|                      |                      |       |  |
|----------------------|----------------------|-------|--|
| <b>Signs/Marker:</b> |                      |       |  |
| Type                 | WELLHEAD             |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |
| Type                 | TANK LABELS/PLACARDS |       |  |
| Comment:             |                      |       |  |
| Corrective Action:   |                      | Date: |  |

|                           |                                      |
|---------------------------|--------------------------------------|
| Emergency Contact Number: |                                      |
| Comment:                  | <input type="text" value="Present"/> |
| Corrective Action:        | <input type="text"/> Date: _____     |

Overall Good:

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

Multiple Spills and Releases?

|                    |                               |       |  |
|--------------------|-------------------------------|-------|--|
| <b>Fencing/:</b>   |                               |       |  |
| Type               | TANK BATTERY                  |       |  |
| Comment:           | Cattle panel                  |       |  |
| Corrective Action: |                               | Date: |  |
| Type               | WELLHEAD                      |       |  |
| Comment:           | And pumpjack, cattle panel.   |       |  |
| Corrective Action: |                               | Date: |  |
| Type               | LOCATION                      |       |  |
| Comment:           | Barb wire                     |       |  |
| Corrective Action: |                               | Date: |  |
| Type               | SEPARATOR                     |       |  |
| Comment:           | And meterhouse, cattle panel. |       |  |
| Corrective Action: |                               | Date: |  |

|                          |     |       |                 |
|--------------------------|-----|-------|-----------------|
| <b>Equipment:</b>        |     |       | corrective date |
| Type: Bird Protectors    | # 1 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Deadman # & Marked | # 4 |       |                 |
| Comment:                 |     |       |                 |
| Corrective Action:       |     | Date: |                 |
| Type: Pump Jack          | # 1 |       |                 |

|                                   |   |       |  |
|-----------------------------------|---|-------|--|
| Comment:                          |   |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Gas Meter Run               | # 1   |       |  |
| Comment:                          | 3" line separator to meterhouse.<br>Calibrated within one year. |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Flow Line                   | # 1   |       |  |
| Comment:                          | 3" line from wellhead to separator.                             |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Horizontal Heated Separator | # 1   |       |  |
| Comment:                          |   |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Ancillary equipment         | # 1   |       |  |
| Comment:                          | Electric box  |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Bradenhead                  | # 1   |       |  |
| Comment:                          |   |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Prime Mover                 | # 1   |       |  |
| Comment:                          | Electric motor  |       |  |
| Corrective Action:                |   | Date: |  |
| Type: Ancillary equipment         | # 1   |       |  |
| Comment:                          | Wellhead  |       |  |
| Corrective Action:                |   | Date: |  |

**Tanks and Berms:**

| Contents           | #                            | Capacity  | Type  | Tank ID | SE GPS                |
|--------------------|------------------------------|-----------|-------|---------|-----------------------|
| PRODUCED WATER     | 1                            | <100 BBLS | OTHER |         | 37.250890,-107.814580 |
| Comment:           | Partially buried steel tank. |           |       |         |                       |
| Corrective Action: |                              |           |       |         | Date:                 |

**Paint**

|                  |          |  |
|------------------|----------|--|
| Condition        | Adequate |  |
| Other (Content)  |          |  |
| Other (Capacity) |          |  |
| Other (Type)     |          |  |

**Berms**

| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|--------------------|----------|---------------------|---------------------|-------------|
| Earth              | Adequate | Walls Sufficent     | Base Sufficient     | Adequate    |
| Comment:           |          |                     |                     |             |
| Corrective Action: |          |                     |                     | Date:       |

**Venting:**

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

**Flaring:**

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

**Inspected Facilities**

Facility ID: 293562 Type: WELL API Number: 067-09424 Status: PR Insp. Status: PR

**Producing Well**

Comment:

Corrective Action:

Date:

**BradenHead**

Date of Last Brhd Test: 03/23/2022 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: \_\_\_\_\_

End Surf Csg Pressure: 0

Comment: Annual bradenhead test past due.

06/23/2023

Corrective Action: Perform annual bradenhead test and submit Form 17 per Rule 419.c.

Date:

**Reclamation - Storm Water - Pit**

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs                          | Chemical BMP Maintenance | Comment                       |
|------------------|-----------------|-------------------------|-----------------------|--|--------------------------|-------------------------------|
| Gravel           | Pass            |                         |                       |  |                          |                               |
| Compaction       | Pass            | Gravel                  | Pass                  |  |                          |                               |
| Ditches          | Pass            | Ditches                 | Pass                  | Material Handling And Spill Prevention | Pass                     | Container within containment. |

Comment: [No visible erosion or sediment migration observed during inspection.](#)

Corrective Action:

Date: \_\_\_\_\_

**Pits:**     NO SURFACE INDICATION OF PIT

**Attached Documents**

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

| Document Num | Description          | URL   |
|--------------|----------------------|---|
| 403456259    | INSPECTION SUBMITTED | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6172499">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6172499</a> |
| 712700378    | Well Location Photos | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6172495">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6172495</a> |