

FORM INSP Rev 05/11	State of Colorado Oil and Gas Conservation Commission 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109		DE ET OE ES
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Inspection Date:
07/10/2012

Document Number:
663901320

Overall Inspection:
Satisfactory

FIELD INSPECTION FORM

Location Identifier	Facility ID <u>213484</u>	Loc ID <u>324930</u>	Tracking Type	Inspector Name: <u>QUINT, CRAIG</u>
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Operator Information:

OGCC Operator Number: 17180 Name of Operator: CITATION OIL & GAS CORP

Address: 14077 CUTTEN RD

City: HOUSTON State: TX Zip: 77269

Contact Information:

Contact Name	Phone	Email	Comment
Rogers, Bob	719-767-8851	brogers@cogc.com	719-340-1445 cell
ELSOM, LEE ANN	281-891-1577 EXT 1577	lelsom@cogc.com	

Compliance Summary:

QtrQtr: NENW Sec: 24 Twp: 11S Range: 45W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Unsatisfactory	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
02/01/2012	663900532	PR	SI	S	P		N
02/05/2010	200230339	PR	PR	S			N
04/15/2008	200130440	PR	PR	S			N
12/01/2006	200100430	PR	PR	S		P	N
12/20/2000	200012543	PR	PR	S	I	P	N
12/31/1997	500145877	ID	SI			P	N
09/27/1996	500145876	PR	PR			P	N
09/07/1995	500145875	PR	PR			P	Y
11/17/1994	500145874		PR				Y
02/16/1994	500145873		SI				

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name
213484	WELL	PR	06/27/2006	GW	063-06043	HICKS B 1 <input checked="" type="checkbox"/>

Equipment: Location Inventory

Inspector Name: QUINT, CRAIG

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:

Type	Satisfactory/Unsatisfactory	comment	Corrective Action	Date
Access	Satisfactory	PARTIALLY ELEVATED DIRT AND GRAVEL ROAD THROUGH PASTURE GRASS.		

Emergency Contact Number: (S/U/V) Satisfactory Corrective Date: _____

Comment: _____

Corrective Action: _____

Spills:

Type	Area	Volume	Corrective action	CA Date
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Multiple Spills and Releases?

Fencing/:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
TANK BATTERY	Satisfactory	WIRE PANELS AROUND TANK		
WELLHEAD	Satisfactory	STEEL PIPE AROUND WELLHEAD		
SEPARATOR	Satisfactory	STEEL PANELS AROUND SEPARATOR		

Venting:

Yes/No	Comment

Flaring:

Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date

Predrill

Location ID: 324930

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Comment: _____

CA: _____ **Date:** _____

Wildlife BMPs:

Comment: _____

CA: _____ **Date:** _____

Stormwater:

Erosion BMPs	Present	Other BMPs	Present

Corrective Action: _____ Date: _____

Comments: Erosion BMPs: _____
 Other BMPs: _____

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 213484 Type: WELL API Number: 063-06043 Status: PR Insp. Status: PA

Cement

Cement Contractor

Contractor Name: ALLIED

Contractor Phone: 785-672-3452

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): 2886/2100/380

Cement Volume (sx): 190

Good Return During Job: YES

Cement Type: CLASS A COM

Comment: PERFS @ 2886', 2100', 380', CIRC SET @ 2786' 7/9/2012. MIRU ALLIED, EST RATE 1/2 BPM @ 1250#, PUMP 40 SX CMT DIS W/10 BBL WATER, POOH W/TBG & SET TOOL, WAIT ON TOOL HAND. RIH W/CIRC SET @ 2011', RU ALLIED, EST RATE 5 BPM @ 500#, PUMP 40 SX CMT DIS W/7BBL WATER, POOH W/TBG & SET TOOL, RU ALLIED, PUMP 47 BBL WATER AND CIRCULATE SHOE PERFS. WO TOOL HAD. RIH W/CIRC SET @ 280', RU ALLIED, EST RATE, PUMP 80 SX CMT DIS W/3.5BBL, SWAP HOSES, PUMP 15 SXCMT IN ANNULUS, STING OUT, POOH W/TBG, RIH W/2 JTS PUMP 15 SX CMT TO SURFACE IN 4 1/2.

Workover

Comment: EASTERN COLORADO WELL SERVICE RIG #4. 7/9/2012-PACKER STUCK IN HOLE, FREE POINT AND CUT TUBING @ 5260', POOH W/TBG, RIH W/CIBP SET @ 5250' W2-SXS CMT, RIH W/CIBP SET @ 3030' W/2 SX CMT, RIH W/GUNS AND PERF @ 2886', 2100', 380', RIH W/CIRC SET @ 2786', SHUT DOWN UNTIL 9/10/2012. 9/10/2012-TRIP TBG AND SET RETAINERS AT 2011', 280', POOH AND LAY DOWN TBG.

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____

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

Water Well:

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

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

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

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

- 1003a. Debris removed? _____ CM _____
CA _____ CA Date _____
- Waste Material Onsite? _____ CM _____
CA _____ CA Date _____
- Unused or unneeded equipment onsite? _____ CM _____
CA _____ CA Date _____
- Pit, cellars, rat holes and other bores closed? _____ CM _____
CA _____ CA Date _____
- Guy line anchors removed? _____ CM _____
CA _____ CA Date _____
- Guy line anchors marked? _____ CM _____
CA _____ CA Date _____

- 1003b. Area no longer in use? _____ Production areas stabilized ? _____
- 1003c. Compacted areas have been cross ripped? _____

- 1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
Cuttings management: _____

- 1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

- 1003 f. Weeds Noxious weeds? _____
- Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Inspector Name: QUINT, CRAIG

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
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S/U/V: _____ Corrective Date: _____

Comment: _____

CA: _____