

**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 |
|----|----|----|----|

Inspection Date:  
06/02/2014

Document Number:  
668602707

Overall Inspection:  
SATISFACTORY

**FIELD INSPECTION FORM**

|                     |               |               |                     |                          |             |
|---------------------|---------------|---------------|---------------------|--------------------------|-------------|
| Location Identifier | Facility ID   | Loc ID        | Inspector Name:     | On-Site Inspection       | 2A Doc Num: |
|                     | <u>207831</u> | <u>321711</u> | <u>QUINT, CRAIG</u> | <input type="checkbox"/> |             |

**Operator Information:**

|                       |   |
|-----------------------|---|
| OGCC Operator Number: | <u>17180</u>                                      |
| Name of Operator:     | <u>CITATION OIL &amp; GAS CORP</u>                |
| Address:              | <u>14077 CUTTEN RD</u>                            |
| City:                 | <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77269</u> |

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

**Contact Information:**

| Contact Name      | Phone                    | Email             | Comment           |
|-------------------|--------------------------|-------------------|-------------------|
| Kennedy, Herschel | 719-767-8851 off         | hkennedy@cogc.com | 719-340-1150 cell |
| ELSOM, LEE ANN    | 281-891-1577<br>EXT 1577 | lelsom@cogc.com   |                   |

**Compliance Summary:**

|         |             |      |           |      |            |        |            |
|---------|-------------|------|-----------|------|------------|--------|------------|
| QtrQtr: | <u>SESW</u> | Sec: | <u>13</u> | Twp: | <u>15S</u> | Range: | <u>42W</u> |
|---------|-------------|------|-----------|------|------------|--------|------------|

| Insp. Date | Doc Num   | Insp. Type | Insp Status | Satisfactory /Action Required | PA P/F/I | Pas/Fail (P/F) | Violation (Y/N) |
|------------|-----------|------------|-------------|-------------------------------|----------|----------------|-----------------|
| 03/04/2013 | 668600443 | PR         | SI          | SATISFACTORY<br>Y             |          |                | No              |
| 04/13/2011 | 200308398 | PR         | PR          | SATISFACTORY<br>Y             |          |                | No              |
| 04/01/2010 | 200241126 | PR         | PR          | SATISFACTORY<br>Y             |          |                | No              |
| 03/15/2007 | 200106580 | PR         | PR          | SATISFACTORY<br>Y             |          | Pass           | No              |
| 03/27/2001 | 200016006 | PR         | PR          | SATISFACTORY<br>Y             | I        | Pass           | No              |
| 07/12/1999 | 825630    | PR         | PR          | SATISFACTORY<br>Y             |          | Pass           | No              |
| 08/26/1997 | 500139346 | PR         | PR          |                               |          | Pass           | No              |
| 05/14/1996 | 500139345 | PR         | PR          |                               |          | Pass           | No              |
| 04/29/1995 | 500139344 | PR         | PR          |                               |          | Pass           | Yes             |

**Inspector Comment:**

**Related Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name     | Insp Status                            |
|-------------|------|--------|-------------|------------|-----------|-------------------|--|
| 207831      | WELL | PR     | 08/11/1989  | OW         | 017-06766 | FRONTERA 24-13 18 | PR <input checked="" type="checkbox"/> |

**Equipment:**

Location Inventory

|                              |                        |                     |                         |
|------------------------------|------------------------|---------------------|-------------------------|
| 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/Action Required | comment                         | Corrective Action | Date |
|--------|------------------------------|---------------------------------|-------------------|------|
| Access | SATISFACTORY                 | GRAVEL ROAD THROUGH FARM GROUND |                   |      |

**Signs/Marker:**

| Type     | Satisfactory/Action Required | Comment            | Corrective Action | CA Date |
|----------|------------------------------|--------------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | LEASE SIGN BY UNIT |                   |         |

Emergency Contact Number (S/A/V): SATISFACTORY

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

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

**Spills:**

| Type   | Area | Volume | Corrective action | CA Date |
|--|------|--------|-------------------|---------|
| <input type="checkbox"/> Multiple Spills and Releases? |      |        |                   |         |

**Fencing/:**

| Type     | Satisfactory/Action Required | Comment      | Corrective Action | CA Date |
|----------|------------------------------|--------------|-------------------|---------|
| WELLHEAD | SATISFACTORY                 | STEEL PANELS |                   |         |

|                    |                              |                                   |                     |                       |                 |
|--------------------|------------------------------|-----------------------------------|---------------------|-----------------------|-----------------|
| <b>Facilities:</b> |                              | <input type="checkbox"/> New Tank | Tank ID: _____      |                       |                 |
| Contents           | #                            | Capacity                          | Type                | SE GPS                |                 |
|                    |                              |                                   | CENTRALIZED BATTERY | 38.741730,-102.054260 |                 |
| S/A/V:             | SATISFACTORY                 |                                   | Comment:            |                       |                 |
| Corrective Action: |                              |                                   |                     | Corrective Date:      |                 |
| <b>Paint</b>       |                              |                                   |                     |                       |                 |
| Condition          |                              |                                   |                     |                       |                 |
| Other (Content)    | _____                        |                                   |                     |                       |                 |
| Other (Capacity)   | _____                        |                                   |                     |                       |                 |
| Other (Type)       | _____                        |                                   |                     |                       |                 |
| <b>Berms</b>       |                              |                                   |                     |                       |                 |
| Type               | Capacity                     | Permeability (Wall)               | Permeability (Base) | Maintenance           |                 |
|                    |                              |                                   |                     |                       |                 |
| Corrective Action  |                              |                                   |                     |                       | Corrective Date |
| Comment            |                              |                                   |                     |                       |                 |
| <b>Venting:</b>    |                              |                                   |                     |                       |                 |
| Yes/No             | Comment                      |                                   |                     |                       |                 |
| NO                 |                              |                                   |                     |                       |                 |
| <b>Flaring:</b>    |                              |                                   |                     |                       |                 |
| Type               | Satisfactory/Action Required | Comment                           | Corrective Action   | CA Date               |                 |
|                    |                              |                                   |                     |                       |                 |

**Predrill**

Location ID: 207831

**Site Preparation:**

Lease Road Adeq.: \_\_\_\_\_ Pads: \_\_\_\_\_ Soil Stockpile: \_\_\_\_\_

**S/AV:** \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date: \_\_\_\_\_ CDP Num.: \_\_\_\_\_

**Form 2A COAs:**

**S/AV:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Wildlife BMPs:**

**S/AV:** \_\_\_\_\_ **Comment:** \_\_\_\_\_

**CA:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Stormwater:**

**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: 207831 Type: WELL API Number: 017-06766 Status: PR Insp. Status: PR

**Producing Well**

Comment: SHUT IN, SEC 13 CENTRAL BATTERY f/(FRONTERA UNIT 13, 14, 15, 16, 17, 18, 19, 20) 3100' E @ 38.741730,-102.054260, NO PRODUCTION SINCE DEC 2013.

**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:** \_\_\_\_\_ Lat \_\_\_\_\_ Long \_\_\_\_\_  
DWR Receipt Num: \_\_\_\_\_ Owner Name: \_\_\_\_\_ GPS : \_\_\_\_\_

**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? Pass CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Waste Material Onsite? Pass CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Unused or unneeded equipment onsite? Pass CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Pit, cellars, rat holes and other bores closed? Pass CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors removed? \_\_\_\_\_ CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_  
Guy line anchors marked? Pass CM \_\_\_\_\_ CA \_\_\_\_\_ CA Date \_\_\_\_\_

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? \_\_\_\_\_

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

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? Pass Segregated soils have been replaced? Pass

**RESTORATION AND REVEGETATION**

Cropland

Top soil replaced Pass Recontoured Pass Perennial forage re-established \_\_\_\_\_

Non-Cropland

Top soil replaced \_\_\_\_\_ Recontoured \_\_\_\_\_ 80% Revegetation \_\_\_\_\_

Inspector Name: QUINT, CRAIG

1003 f. Weeds Noxious weeds? \_\_\_\_\_ P \_\_\_\_\_

Comment: **UNUSED AREAS OF THE LOCATION ARE FARMED.**

Overall Interim Reclamation Pass

**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 \_\_\_\_\_

Weeds present \_\_\_\_\_ Subsidence \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_ Date \_\_\_\_\_

Overall Final Reclamation \_\_\_\_\_ Well Release on Active Location  Multi-Well Location

**Storm Water:**

| Loc Erosion BMPs | BMP Maintenance | Lease Road Erosion BMPs | Lease BMP Maintenance | Chemical BMPs | Chemical BMP Maintenance | Comment |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
| Gravel           | Pass            | Gravel                  | Pass                  |               |                          |         |
| Compaction       | Pass            | Compaction              | Pass                  |               |                          |         |

S/A/V: SATISFACTOR Corrective Date: \_\_\_\_\_

Y \_\_\_\_\_

Comment: \_\_\_\_\_

CA: \_\_\_\_\_

**Pits:**  NO SURFACE INDICATION OF PIT