

**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

Inspection Date:

04/20/2016

Document Number:

679901435

Overall Inspection:

SATISFACTORY**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	207607	321638	Welsh, Brian	<input type="checkbox"/>	

**Operator Information:**OGCC Operator Number: 17180Name of Operator: CITATION OIL & GAS CORPAddress: 14077 CUTTEN RDCity: HOUSTON State: TX Zip: 77269

- ☐ 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
Rogers, Bob	719-767-8851	brogers@cogc.com	
Elsom, Lee Ann	281-891-1577	lelsom@cogc.com	

**Compliance Summary:**QtrQtr: NWSW Sec: 29 Twp: 13S Range: 47W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
06/16/2015	668501551	SI	AC	SATISFACTORY			No
05/06/2014	668602616	SI	AC	SATISFACTORY	P		No
05/07/2013	668600749	IJ	AC	SATISFACTORY			No
04/22/2011	200308467	MI	AC	SATISFACTORY			No
03/17/2010	200235958	RT	AC	SATISFACTORY			No
05/28/2009	200211630	RT	AC	SATISFACTORY			No
05/23/2008	200190244	RT	SI	SATISFACTORY			No
03/29/2007	200108280	RT	AC	SATISFACTORY		Pass	No
04/25/2006	200090210	MI	AC	SATISFACTORY		Pass	No
07/14/2005	200074792	RT	AC	SATISFACTORY		Pass	No
07/21/2004	200058146	RT	AC	SATISFACTORY		Pass	No
08/15/2003	200043193	RT	AC	SATISFACTORY		Pass	No
07/31/2002	200029503	RT	AC	SATISFACTORY		Pass	No
05/16/2001	200019441	MI	AC	SATISFACTORY		Pass	No
08/30/2000	200009335	RT	AC	SATISFACTORY	I	Pass	No
12/06/1999	500138939	PR	AC			Pass	No
12/06/1997	500138938	PR	AC			Pass	No
04/15/1996	500138937	PR	AC			Pass	Yes
01/24/1995	500138936	PR	AC				
12/09/1993	500138935		AC			Pass	No

Inspector Name: Welsh, Brian

11/29/1993	500138934		AC				
------------	-----------	--	----	--	--	--	--

**Inspector Comment:**

**Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
207607	WELL	IJ	05/01/2014	ERIW	017-06542	MPU 13-29	AC	<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	Dirt road through CRP		

**Signs/Marker:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Lease sign mounted to meter shed		

Emergency Contact Number (S/AR): SATISFACTORY

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

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

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

**Good Housekeeping:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date

**Spills:**

Type	Area	Volume	Corrective action	CA Date
------	------	--------	-------------------	---------

☐ Multiple Spills and Releases?**Fencing/:**

Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	Metal panels around wellhead and meter shed		

**Equipment:**

Type:	#	Satisfactory/Action Required:
Comment		

Inspector Name: Welsh, Brian

Corrective Action	Date:
-------------------	-------

**Venting:**

Yes/No	NO
Comment	

**Flaring:**

Type	Satisfactory/Action Required
Comment:	
Corrective Action:	Correct Action Date:

**Predrill**

Location ID: 207607

**Site Preparation:**

Lease Road Adeq.: Pads: Soil Stockpile:

**S/AR:**

Corrective Action: Date: CDP Num.:

**Form 2A COAs:**

**S/AR:** SATISFACTORY **Comment:** No COAs

**CA:** **Date:**

**Wildlife BMPs:**

**S/AR:** **Comment:**

**CA:** **Date:**

**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: 207607 Type: WELL API Number: 017-06542 Status: IJ Insp. Status: AC

**Underground Injection Control**

UIC Violation: \_\_\_\_\_

Maximum Injection Pressure: \_\_\_\_\_

**UIC Routine**

Inj./Tube: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ MPP \_\_\_\_\_  
 (e.g. 30 psig or -30" Hg) Inj Zone: MRRWB

TC: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ Last MIT: 04/22/2011

Brhd: Pressure or inches of Hg \_\_\_\_\_ Previous Test Pressure \_\_\_\_\_ AnnMTReq: \_\_\_\_\_

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

Method of Injection: \_\_\_\_\_

Test Type: 5 Year Tbg psi: 100PSI Csg psi: 0PSI BH psi: \_\_\_\_\_

Insp. Status: Pass

Comment: **INITIAL CSG HAD LIGHT BLOW w/FLUID TO SFC, DIED IMMEDIATELY. MIRU EXTREME HEAT. LOADED W/1BBL. PRESSURED CSG TO 780 PSIG. 5 MIN 760#. 10 MIN 755#. 15 MIN 755#. -25 PSI LOSS**

**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. Waste and Debris removed? Pass

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Unused or unneeded equipment onsite? Pass

CM \_\_\_\_\_

CA \_\_\_\_\_ CA Date \_\_\_\_\_

Inspector Name: Welsh, Brian

Pit, cellars, rat holes and other bores closed? Pass

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 \_\_\_\_\_

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	Compaction	Pass			

Inspector Name: Welsh, Brian

S/A/V: SATISFACTOR  
Y

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

Comment:

CA:

**Pits:** ☒ NO SURFACE INDICATION OF PIT