

**FORM  
INSP**Rev  
X/15

# 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:

05/18/2017

Submitted Date:

05/18/2017

Document Number:

679902555**FIELD INSPECTION FORM**

Loc ID \_\_\_\_\_ Inspector Name: \_\_\_\_\_ On-Site Inspection ☐  
321695 \_\_\_\_\_ Welsh, Brian \_\_\_\_\_ 2A Doc Num: \_\_\_\_\_

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

- ☐ THIS IS A FOLLOW UP INSPECTION  
☐ FOLLOW UP INSPECTION REQUIRED  
☐ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**3 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

Contact Name	Phone	Email	Comment
Kennedy, Herschel	719-767-8851	hkennedy@cogc.com	
Quint, Craig		craig.quint@state.co.us	
Elsom, Lee Ann	281-891-1577	lelsom@cogc.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
207804	WELL	IJ	01/20/2012	ERIW	017-06739	ARAPAHOE UNIT 128 (34-25)	AC

**General Comment:**

**Location****Lease Road:**

Type	Access		
comment:	Gravel road through pasture		
Corrective Action	L	Date:	

Overall Good: ☒**Signs/Marker:**

Type	WELLHEAD		
Comment:	Lease sign by unit		
Corrective Action:		Date:	

**Emergency Contact Number:**

Comment:

Corrective Action:  Date:

Overall Good: ☒**Spills:**

Type	Area	Volume		
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In Containment: No

Comment: ☐ Multiple Spills and Releases?**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

**Flaring:**

Type		
Comment:		
Corrective Action:		Date:

**Inspected Facilities**Facility ID: 207804 Type: WELL API Number: 017-06739 Status: IJ Insp. Status: AC**Underground Injection Control**

UIC Violation: \_\_\_\_\_ Maximum Injection Pressure: \_\_\_\_\_

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>MRRW</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>03/16/2016</u>
			AnnMTReq: _____

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

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

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

Test Type: Verification of Repairs Tbg psi: 0 PSI Csg psi: 0 PSI BH psi: \_\_\_\_\_Insp. Status: PassComment: INITIAL CSG DEAD. MIRU EXTREME HEAT. LOADED W/1BBL. PRESSURED CSG TO 710 PSIG. 5 MIN 710#. 10 MIN 710#. 15 MIN 710#. 0 PSI LOSS

Corrective Action: \_\_\_\_\_ 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	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment: 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
401287542	INSPECTION SUBMITTED	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4151070">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4151070</a>
679902556	Form 21	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4151063">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4151063</a>