

**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:

11/30/2017

Submitted Date:

11/30/2017

Document Number:

679903506**FIELD INSPECTION FORM**

Loc ID 321723 Inspector Name: Welsh, Brian On-Site Inspection ☐ 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:6 Number of Comments0 Number of Corrective Actions☐ Corrective Action Response Requested**Contact Information:**

| Contact Name | Phone | Email | Comment |
|-------------------|--------------|-------------------|---------|
| Elsom, Lee Ann | 281-891-1577 | lelsom@cogc.com | |
| Kennedy, Herschel | 719-767-8851 | hkennedy@cogc.com | |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|--------------------------|-------------|
| 207849 | WELL | TA | 02/27/1991 | ERIW | 017-06784 | ARAPAHOE UNIT 146(23-22) | TA |

General Comment:

Routine Inspection

Location

| | | | |
|--------------------|-----------------------|-------|--|
| Lease Road: | | | |
| Type | Other | | |
| comment: | No access to wellhead | | |
| Corrective Action | L | Date: | |

Overall Good: ☒

| | | | |
|----------------------|------------------------|-------|--|
| Signs/Marker: | | | |
| Type | WELLHEAD | | |
| Comment: | Lease sign by wellhead | | |
| Corrective Action: | | Date: | |

Emergency Contact Number:

Comment:

Corrective Action: Date:

Overall Good: ☒

| | | | | | |
|----------------|------|--------|--|--|--|
| Spills: | | | | | |
| Type | Area | Volume | | | |

In Containment: No

Comment: ☐ Multiple Spills and Releases?

| | | | |
|---------------------------|---------------------------------------|-------|-----------------|
| Equipment: | | | corrective date |
| Type: Ancillary equipment | # 2 | | |
| Comment: | Electric panel and cathodic rectifier | | |
| Corrective Action: | | Date: | |

Venting:

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

Flaring:

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

| Inspected Facilities | | | | | | | | | |
|---|--------|-------|------|-------------|-----------|---------|----|---------------|----|
| Facility ID: | 207849 | Type: | WELL | API Number: | 017-06784 | Status: | TA | Insp. Status: | TA |
| <div>Idle Well</div> <div>Purpose: <input checked="" type="checkbox"/> Shut In <input type="checkbox"/> Temporarily Abandoned Reminder: </div> <div>Comment: Well is SI at time of inspection. Passing MIT performed 7/25/14</div> <div>Corrective Action: Date: </div> | | | | | | | | | |

Reclamation - Storm Water - Pit

Storm Water:

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

Comment: Location and access are farmed over

Corrective Action:

Date:

Pits: ☒ NO SURFACE INDICATION OF PIT