

**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:

01/17/2019

Submitted Date:

01/18/2019

Document Number:

680304547

**FIELD INSPECTION FORM**

Loc ID 311741 Inspector Name: SCHURE, KYM On-Site Inspection  2A Doc Num: \_\_\_\_\_

**Status Summary:**

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

**Operator Information:**

OGCC Operator Number: 17180  
Name of Operator: CITATION OIL & GAS CORP  
Address: 14077 CUTTEN RD  
City: HOUSTON State: TX Zip: 77269

**Findings:**

- 9 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

**ANY CORRECTIVE ACTION(S) FROM  
PREVIOUS INSPECTIONS THAT HAVE NOT  
BEEN ADDRESSED ARE STILL APPLICABLE**

**Contact Information:**

Contact Name	Phone	Email	Comment
Quint, Craig		craig.quint@state.co.us	
Wolff, Geoff		gwolff@cogc.com	

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
220989	WELL	IJ	07/11/1996	DSPW	075-09115	ARCO-SINDT 6-15	SI

**General Comment:**

UIC/MIT - SATISFACTORY  
Form 42 Doc#401902029 received  
Form 21 copy attached

<b>Location</b>			
<b>Lease Road:</b>			
Type	Access		
comment:	Gravel road adjacent to county road. SATISFACTORY		
Corrective ActionL		Date:	
Overall Good: <input type="checkbox"/>			
<b>Signs/Marker:</b>			
Type	WELLHEAD		
Comment:	Satisfactory		
Corrective Action:		Date:	
<b>Emergency Contact Number:</b>			
Comment:	Satisfactory		Date: _____
Corrective Action:			
Overall Good: <input type="checkbox"/>			
<b>Spills:</b>			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
<b>Equipment:</b>			
Type: Other	# 0		corrective date
Comment:	IJ well.		
Corrective Action:		Date:	
<b>Venting:</b>			
Yes/No			
Comment:			
Corrective Action:		Date:	
<b>Flaring:</b>			
Type			
Comment:			
Corrective Action:		Date:	

**Inspected Facilities**

Facility ID: 220989 Type: WELL API Number: 075-09115 Status: IJ Insp. Status: SI

**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>DJSND</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>05/17/2017</u>
			AnnMTReq: _____

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

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

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

Test Type: Verification of Repairs Tbg psi: \_\_\_\_\_ Csg psi: 1400 BH psi: \_\_\_\_\_

Insp. Status: Pass

Comment: Re-set packer on well that has previously had (4.5") liner cemented in. Well perms have been cleaned out and MIT performed. Well held (1400) psi. throughout duration of (15) min. test. Loss or Gain = 0. Form 21 copy attached.

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

**Workover**

Comment: Re-set packer

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	In Process	Gravel	In Process			

Comment: [Use BMP's for erosion management](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT

**COGCC Comments**

Comment	User	Date
<a href="#">UIC-MIT 2019 SATISFACTORY</a>	schureky	01/18/2019

**Attached Documents**

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
680304548	UIC-MIT 2019	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4707582">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4707582</a>