

**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:

01/29/2020

Submitted Date:

01/29/2020

Document Number:

697000497

**FIELD INSPECTION FORM**

Loc ID 321739 Inspector Name: Welsh, Brian 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:**

8 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
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
207884	WELL	TA	09/01/2018	OW	017-06819	ARAPAHOE UNIT 101(44-1)	TA

**General Comment:**

[Routine Inspection](#)

**Location**

**Lease Road:**

	Type Access		
comment:	Trail through farm ground		
Corrective Action:		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			

In Containment: No

Comment:

Multiple Spills and Releases?

**Equipment:**

			corrective date
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:		Date:	
Type: Prime Mover	# 1		
Comment: Electric motor			
Corrective Action:		Date:	
Type: Ancillary equipment	# 2		
Comment: Electric panel and cathodic rectifier			
Corrective Action:		Date:	
Type: Pump Jack	# 1		
Comment: American 228. Horsehead removed and stored next to unit			
Corrective Action:		Date:	
Type: Horizontal Heater Treater	# 0		
Comment:			
Corrective Action:		Date:	

**Tanks and Berms:**

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	0		FIBERGLASS AST		,102.053730
Comment:					

Corrective Action:	Date:
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**Paint**

Condition			
Other (Content)			
Other (Capacity)			
Other (Type)			

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	0		STEEL AST		38.769380,-102.053730

Comment:				
Corrective Action:				Date:

**Paint**

Condition			
Other (Content)			
Other (Capacity)			
Other (Type)			

**Berms**

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:				
Corrective Action:				Date:

**Venting:**

Yes/No			
Comment:			
Corrective Action:			Date:

**Flaring:**

Type			
Comment:			
Corrective Action:			Date:

**Inspected Facilities**

Facility ID: 207884 Type: WELL API Number: 017-06819 Status: TA Insp. Status: TA

**Producing Well**

Comment: [Well is TA at time of inspection. Tubing isolated with 2" ball valve. Passing MIT performed 11/8/17](#)

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	Other	Pass			

Comment: [Access is farmed over](#)

Corrective Action:

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

**Pits:**  NO SURFACE INDICATION OF PIT