

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

402994259

Date Received:

SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c.(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

OPERATOR INFORMATION

OGCC Operator Number: 17180

Name of Operator: CITATION OIL & GAS CORP

Address: 14077 CUTTEN RD

City: HOUSTON State: TX Zip: 77069

Contact Name and Telephone:

Name: Ron Schultz

Phone: (281) 8911559 Fax: ()

Email: rschultz@cogc.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159178

Operator's Disposal Facility Name: SINDT ARTHUR #2 WD

Operator's Disposal Facility Number:

Location: QtrQtr: SESW Sec: 31 Twp: 10N Range: 52W Meridian: 6

County: LOGAN

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 13 Deleted: 1 Added: 12

SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06603-00	Well Name & No: ARTHUR SINDT 4
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NENE Section: 7 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06620-00	Well Name & No: W E DICKINSON 3
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: SWSW Section: 6 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06625-00	Well Name & No: W E DICKINSON 1
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NESW Section: 6 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06675-00	Well Name & No: ARTHUR SINDT 8
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NESW Section: 31 Township: 10N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06680-00</u>	Well Name & No: <u>ARTHUR SINDT 5</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-08596-00</u>	Well Name & No: <u>ARTHUR SINDT 10</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input type="checkbox"/>	API Number: <u>05-075-09326-00</u>	Well Name & No: <u>DUBOIS 5</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input checked="" type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09333-00</u>	Well Name & No: <u>FLUHARTY 1</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09340-00</u>	Well Name & No: <u>SINDT 13</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09342-00</u>	Well Name & No: <u>DICKINSON 6</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09344-00</u>	Well Name & No: <u>DUBOIS 6</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09365-00</u>	Well Name & No: <u>DUBOIS 7H</u>
	Operator Name: <u>CITATION OIL & GAS CORP</u>	Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source <input checked="" type="checkbox"/>	API Number: 05-075-09370-00	Well Name & No: SINDT 14H
Delete Source <input type="checkbox"/>	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
	Location: QtrQtr: NESW Section: 31 Township: 10N Range: 52W Meridian: 6	
	Producing Formation: OSND	Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: _____ mg/L

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Ron Schultz Signed: _____

Title: Manager-Regulatory Comp Date: _____

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type Description

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Attachment List

Att Doc Num Name

402996757	Source of Produced Water Import
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Total Attach: 1 Files

General Comments

User Group Comment Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)