

# State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

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## 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: <u>17180</u> Name of Operator: <u>CITATION OIL &amp; GAS CORP</u> Address: <u>14077 CUTTEN RD</u> City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77069</u>	Contact Name and Telephone: Name: <u>Ron Schultz</u> Phone: <u>(281) 8911559</u> Fax: <u>( )</u> Email: <u>rschultz@cogc.com</u>
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### DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>160020</u>	Operator's Disposal Facility Name: <u>Padroni West Unit</u>	Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>SESW</u> Sec: <u>6</u> Twp: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>		
County: <u>LOGAN</u>		

### SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 15 Deleted: 15 Added: 0

### SOURCE OF PRODUCED WATER

Add Source <input type="checkbox"/>	API Number: <u>05-075-06603-00</u> Well Name & No: <u>ARTHUR SINDT 4</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input checked="" type="checkbox"/>	Location: QtrQtr: <u>NENE</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 type="checkbox"/>	API Number: <u>05-075-06620-00</u> Well Name & No: <u>W E DICKINSON 3</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input checked="" type="checkbox"/>	Location: QtrQtr: <u>SWSW</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>05-075-06625-00</u> Well Name & No: <u>W E DICKINSON 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input checked="" type="checkbox"/>	Location: QtrQtr: <u>NESW</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>05-075-06653-00</u> Well Name & No: <u>FRANCIS PARKE 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input checked="" 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	API Number: <u>05-075-06658-00</u>	Well Name & No: <u>SINDT 1</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	Producing Formation: <u>JSND</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	API Number: <u>05-075-06675-00</u>	Well Name & No: <u>ARTHUR SINDT 8</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-06680-00</u>	Well Name & No: <u>ARTHUR SINDT 5</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NWSW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-08596-00</u>	Well Name & No: <u>ARTHUR SINDT 10</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09326-00</u>	Well Name & No: <u>DUBOIS 5</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NENW</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09333-00</u>	Well Name & No: <u>FLUHARTY 1</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NWNE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09340-00</u>	Well Name & No: <u>SINDT 13</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09342-00</u>	Well Name & No: <u>DICKINSON 6</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>SESW</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09344-00</u>	Well Name & No: <u>DUBOIS 6</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NWNE</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09365-00</u>	Well Name & No: <u>DUBOIS 7H</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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	API Number: <u>05-075-09370-00</u>	Well Name & No: <u>SINDT 14H</u>
<input type="checkbox"/>	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>	
<input checked="" type="checkbox"/>	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

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 Reg Compliance Date: 03/31/2022

COGCC Approved:  Date: 10/19/2022

**CONDITIONS OF APPROVAL, IF ANY:**

COA Type	Description
0 COA	

**Attachment List**

Att Doc Num	Name
403000863	FORM 26 SUBMITTED
403000921	Source of Produced Water Import

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)