

**FORM
INSP**Rev
X/20**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:

11/07/2022

Submitted Date:

11/07/2022

Document Number:

701006065**FIELD INSPECTION FORM**Loc ID 321813 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: 77069**Status Summary:**

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

Findings:4 Number of Comments0 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
Redweik, Bob	(281) 891-1550	bredweik@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
208092	WELL	TA	03/30/2020	OW	017-07027	BILL 32-26 5	TA

General Comment:

5 Year SI/TA Status MIT

Location

Lease Road:			
Type	Access		
comment:	Elevated gravel road through pasture		
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?**Venting:**

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities									
Facility ID:	208092	Type:	WELL	API Number:	017-07027	Status:	TA	Insp. Status:	TA
Idle Well									
Purpose: <input type="checkbox"/> Shut In <input checked="" type="checkbox"/> Temporarily Abandoned Reminder: _____									
Comment: MIRU EXTREME HEAT. LOAD CSG W/2BBL. PRESSURED UP TO 400 PSI. 5 MIN 400#. 10 MIN 400#. 15 MIN 400#. LOSS OF 0 PSI									
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	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
701006069	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5911466