

**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:

04/27/2023

Submitted Date:

04/28/2023

Document Number:

701006908

FIELD INSPECTION FORM

Loc ID 321813 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: 77069

Findings:

- 5 Number of Comments
- 1 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	PA

General Comment:

P&A Inspection

Location

Lease Road:			
Type	Access		
comment:	Elevated gravel road through pasture		
Corrective ActionL			Date:

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign by wellhead		
Corrective Action:			Date:

Emergency Contact Number:			
Comment:	<input style="width: 95%;" type="text"/>		
Corrective Action:	<input style="width: 95%;" type="text"/>		Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:			corrective date
Type: Ancillary equipment	# 2		
Comment:	Electric panel and cathodic rectifier		
Corrective Action:	Remove equipment from location		Date: <u>05/27/2023</u>

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: PA

Cement

Cement Contractor

Contractor Name: HP Oilfield Services

Contractor Phone: _____

Surface Casing

Cement Volume (sx): _____

Circulate to Surface: _____

Cement Fall Back: _____

Top Job, 1" Volume: _____

Intermediate Casing

Cement Volume (sxs): _____

Good Return During Job: _____

Production Casing

Cement Volume (sx): _____

Good Return During Job: _____

Plugging Operations

Depth Plugs(feet range): 620/sfc

Cement Volume (sx): _____

Good Return During Job: _____

Cement Type: 60/40 POZ w/4% gel

Comment: HALDE WATER, HP OILFIELD SERVICES, CODELL WELL SERVICE. INSPECTOR ARRIVED IN TIME TO WITNESS SFC PIPE TOP OFF WITH 7BBLs AFTER WOC FOR 1 HR

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
Compaction	Pass	Compaction	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
403394268	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6104399