

**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:

07/12/2023

Submitted Date:

07/13/2023

Document Number:

701007158

FIELD INSPECTION FORM

Loc ID 321907 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:

- 6 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
Morgan, John		john.morgan@state.co.us	
Quint, Craig		craig.quint@state.co.us	
Redweik, Bob	(281) 891-1550	bredweik@cogc.com	
Rogers, Bob	719-767-8851	brogers@cogc.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
208470	WELL	IJ	02/01/2017	ERIW	017-07405	SPEAKER 44-13 8	AC

General Comment:

5 Year UIC MIT

Location

Lease Road:			
	Type Access		
comment:	Partially elevated gravel road through pasture		
Corrective Action:			Date:

Overall Good:

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

Emergency Contact Number:			
Comment:			
Corrective Action:			Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:			
	Type WELLHEAD		
Comment:	Metal panels around wellhead and meter shed		
Corrective Action:			Date:

Equipment:			corrective date
Type: Gas Meter Run	# 1		
Comment:			
Corrective Action:			Date:
Type: Ancillary equipment	# 2		
Comment:	Electric panel and cathodic rectifier		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:

Venting:			
Yes/No			
Comment:			
Corrective Action:			Date:

Flaring:			
Type			

Comment:	
Corrective Action:	Date:

Inspected Facilities

Facility ID: 208470 Type: WELL API Number: 017-07405 Status: IJ Insp. Status: AC

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube:	Pressure or inches of Hg _____ (e.g. 30 psig or -30" Hg)	Previous Test Pressure _____	MPP _____
TC:	Pressure or inches of Hg _____	Previous Test Pressure _____	Inj Zone: <u>MRRW</u>
Brhd:	Pressure or inches of Hg _____	Previous Test Pressure _____	Last MIT: <u>07/17/2018</u>
			AnnMTReq: <u>NO</u>

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 370 Csg psi: 0 PSIG BH psi: _____

Insp. Status: Pass

Comment: INITIAL CSG HAD LIGHT BLOW, DIED IMMEDIATELY. MIRU EXTREME HEAT. LOADED W/1BBL. PRESSURED CSG TO 850 PSIG. 5 MIN 850#. 10 MIN 850#. 15 MIN 850#. 0 PSI LOSS

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
701007169	Form 21	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=6180250