

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
404538839

Date Received:
02/09/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:
2 of 2 CAs from the FIR responded to on this Form
2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC 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:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
GONCALVES, STEFF		env-codnr@cogc.com
REDWEIK, BOB		BRedweik@cogc.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 713602689
Inspection Date: 02/02/2026 FIR Submit Date: 02/05/2026 FIR Status:

Inspected Operator Information:

Company Name: CITATION OIL & GAS CORP Company Number: 17180
Address: 14077 CUTTEN RD
City: HOUSTON State: TX Zip: 77069

LOCATION - Location ID: 321898

Location Name: CHUNKY 12-28-613S43W Number: 28SWNW County: CHEYENNE
Qtrqtr: SWN Sec: 28 Twp: 13S Range: 43W Meridian: 6
Latitude: 38.894861 Longitude: -102.238270

FACILITY - API Number: 05-017-00 Facility ID: 208445

Facility Name: CHUNKY 12-28 Number: 1
Qtrqtr: SWN Sec: 28 Twp: 13S Range: 43W Meridian: 6
Latitude: 38.894861 Longitude: -102.238270

CORRECTIVE ACTIONS:

1 CA# 210831

Corrective Action: Submit Form 19 to report historic spill of impacted material and Contact ECMC EPS staff per Rule 912.b. Date: 02/09/2026

Response: CA COMPLETED Date of Completion: 03/09/2026

Operator Comment: A form 19 initial (pending) was submitted on 2/8/2026 (Document ID #404535105).

ECMC Decision: _____

ECMC Representative:

2 CA# 210832

Corrective Action: Comply with 1004 Rules.

Date: _____

Response: CA COMPLETED

Date of Completion: 02/09/2026

Operator Comment:

The site will be reclaimed in compliance with 1004 series rules once the remediation process has been completed.

ECMC Decision: _____

ECMC Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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

Print Name: Joel Mason

Signed: _____

Title: Agent

Date: 2/9/2026 9:02:51 PM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
404538839	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files