

**FORM
INSP**

Rev
X/15

**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:

03/12/2018

Submitted Date:

03/12/2018

Document Number:

679904120

FIELD INSPECTION FORM

Loc ID 321650 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: 77269

Findings:

- 9 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

Contact Information:

Contact Name	Phone	Email	Comment
Rogers, Bob	719-767-8851	brogers@cogc.com	
Elsom, Lee Ann	281-891-1577	lelsom@cogc.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
207667	WELL	PR	03/18/1986	GW	017-06602	MPU 11-33	PR

General Comment:

[Routine Inspection](#)

Location

Lease Road:			
Type	Access		
comment:	Gravel road through farm ground		
Corrective Action:			Date:

Overall Good:

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

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

Good Housekeeping:			
Type	STORAGE OF SUPL		
Comment:	Trailer with skid mounted separator system is stored neatly by wellhead		
Corrective Action:			Date:

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment: _____

Multiple Spills and Releases?

Fencing/:			
Type	OTHER		
Comment:	Pipe fence around transformer		
Corrective Action:			Date:

Equipment:			corrective date
Type: Prime Mover	# 1		
Comment:	Electric motor		
Corrective Action:			Date:
Type: Ancillary equipment	# 3		
Comment:	Electric panel, cathodic rectifier, power transformer		
Corrective Action:			Date:
Type: Pump Jack	# 1		
Comment:	Baker 456		
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			

Corrective Action:		Date:	
--------------------	--	-------	--

Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type		
Comment:		
Corrective Action:		Date:

Inspected Facilities

Facility ID: 207667 Type: WELL API Number: 017-06602 Status: PR Insp. Status: PR

Producing Well

Comment: [Producing. Central tank battery for \(Section 33\) 3900' ENE @ 38.880060/-102.781310](#)

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