

# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

Phone: (303) 894-2100 Fax: (303) 894-2109



FOR OGCC USE ONLY

Document Number:

402340470

Date Received:

03/12/2020

## SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c.(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

### OPERATOR INFORMATION

OGCC Operator Number: 17180

Name of Operator: CITATION OIL &amp; GAS CORP

Address: 14077 CUTTEN RD

City: HOUSTON

State: TX

Zip: 77269

Contact Name and Telephone:

Name: Lee Ann Elsom

Phone: (281) 891-1577

Fax: (281) 580-2168

Email: lelsom@cogc.com

### DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159177

Operator's Disposal Facility Name: ARCO-SINDT 6-15

Operator's Disposal Facility Number:

Location: QtrQtr: SWSE

Sec: 6

Twp: 9N

Range: 52W

Meridian: 6

County: LOGAN

### SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 17

Deleted: 0

Added: 17

### SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06603-00	Well Name & No: ARTHUR SINDT 4
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NENE Section: 7 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06620-00	Well Name & No: W E DICKINSON 3
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: SWSW Section: 6 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06625-00	Well Name & No: W E DICKINSON 1
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NESW Section: 6 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: OSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-075-06653-00	Well Name & No: FRANCIS PARKE 1
	Operator Name: CITATION OIL & GAS CORP	Operator No: 17180
Delete Source <input type="checkbox"/>	Location: QtrQtr: NWNE Section: 6 Township: 9N Range: 52W Meridian: 6	
	Producing Formation: DSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06653-00</u> Well Name & No: <u>FRANCIS PARKE 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06658-00</u> Well Name & No: <u>SINDT 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>JSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06658-00</u> Well Name & No: <u>SINDT 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06675-00</u> Well Name & No: <u>ARTHUR SINDT 8</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-06680-00</u> Well Name & No: <u>ARTHUR SINDT 5</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-08596-00</u> Well Name & No: <u>ARTHUR SINDT 10</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09326-00</u> Well Name & No: <u>DUBOIS 5</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09333-00</u> Well Name & No: <u>FLUHARTY 1</u> Operator Name: <u>CITATION OIL &amp; GAS CORP</u> Operator No: <u>17180</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u> Producing Formation: <u>J-O</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09340-00</u>	Well Name & No: <u>SINDT 13</u>	
	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>	
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>		
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09342-00</u>	Well Name & No: <u>DICKINSON 6</u>	
	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>	
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SESW</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>		
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09344-00</u>	Well Name & No: <u>DUBOIS 6</u>	
	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>	
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>7</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>		
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09365-00</u>	Well Name & No: <u>DUBOIS 7H</u>	
	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>	
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>9N</u> Range: <u>52W</u> Meridian: <u>6</u>		
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-075-09370-00</u>	Well Name & No: <u>SINDT 14H</u>	
	Operator Name: <u>CITATION OIL &amp; GAS CORP</u>	Operator No: <u>17180</u>	
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NESW</u> Section: <u>31</u> Township: <u>10N</u> Range: <u>52W</u> Meridian: <u>6</u>		
	Producing Formation: <u>OSND</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

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

Print Name: Lee Ann Elsom Signed: \_\_\_\_\_

Title: Mgr Regulatory Compliance Date: 03/12/2020

COGCC Approved:  Date: 12/03/2020

**CONDITIONS OF APPROVAL, IF ANY:**

COA Type	Description

**Attachment List**

Att Doc Num	Name
402340470	FORM 26 SUBMITTED

Total Attach: 1 Files

**General Comments**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)