

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:

401943621

Date Received:

02/19/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 17180

Name of Operator: CITATION OIL & GAS CORP

Address: 14077 CUTTEN RD

City: HOUSTON State: TX Zip: 77269

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Schlagenhauf, Mark</u>		<u>mark.schlagenhauf@state.co.us</u>
<u>Axelsson, John</u>		<u>john.axelsson@state.co.us</u>
<u>Pesicka, Conor</u>		<u>conor.pesicka@state.co.us</u>
<u>Kennedy, Herschel</u>	<u>719-767-8851 off/51922</u>	<u>hkennedy@cogc.com</u>
<u>Ward, Sharon</u>		<u>sward@cogc.com</u>
<u>Elsom, Lee Ann</u>	<u>281-891-1577</u>	<u>lelsom@cogc.com</u>
<u>Lee Ann Elsom</u>	<u>281-891-1577</u>	<u>lelsom@cogc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 682600619

Inspection Date: 01/31/2019

FIR Submit Date: 02/01/2019

FIR Status: _____

Inspected Operator Information:

Company Name: CITATION OIL & GAS CORP

Company Number: 17180

Address: 14077 CUTTEN RD

City: HOUSTON State: TX Zip: 77269

LOCATION - Location ID: _____

Location Name: _____ Number: _____ County: _____

Qtrqr: SWN Sec: 19 Twp: 14S Range: 41W Meridian: 6
W

Latitude: _____ Longitude: _____

FACILITY - API Number: 05- -00 Facility ID: 461583

Facility Name: Simpson Battery Number: 461583

Qtrqr: SWN Sec: 19 Twp: 14S Range: 41W Meridian: 6
W

Latitude: _____ Longitude: _____

CORRECTIVE ACTIONS:

1 CA# 122278

Corrective Action:

Date: 02/10/2019

Response: CA COMPLETED

Date of Completion: 02/09/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

2 CA# 122279

Corrective Action:

Date: 03/02/2019

Response: CA COMPLETED

Date of Completion: 02/09/2019

Operator Comment:

COGCC Decision: _____

COGCC Representative:

3 CA# 122280

Corrective Action:

Date: 03/02/2019

Response: CA COMPLETED

Date of Completion: 02/09/2019

Operator Comment:

COGCC Decision: _____

COGCC 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: Lee Ann Elsom Signed: _____

Title: Mgr Regulatory Compliance Date: 2/19/2019 9:23:13 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
401943630	Simpson Water Tank Repair

