

Inspection Form: UT20000-02535 – Citation Oil & Gas Corporation Houston; WHU 10

U.S. Environmental Protection Agency, Region 8

Underground Injection Control Program

 Inspector(s): Gary Wang, Don Breffle, Elizabeth Tyson

 Operator Representative: Jeff Oats

 Date: 8/24/23

Tribal Representative: _____

 Time: 12:06 am/pm

WELL INFORMATION			
Well Type	Enhanced Recovery (2R)	Prior Inspection	05/22/2019
Well Status, Date	Active, 12/31/2002	Last MIT (I)	SAPT, 5 Years, 3/4/2021
API No.	43-047-15561	Last MIT (II)	
Oilfield Name	Walker Hollow	MAIP1, Date	1654 psi, N.D.
Latitude / Longitude	40.225824 / -109.227117	MAIP2, Date	
Indian Country	Uintah & Ouray	Cum Vol Limit	
Permit Issuance	Rule Authorized		

INSPECTION TYPE:			WELL STATUS:	
☒ Routine	☐ Construction/Rework	☐ Complaint	☐ Under Construction	☐ Active
☐ Emergency	☐ MIT Witness	☐ Closure/P&A	☐ Temporary Abandon	☐ P&A'ed
☐ Other: _____			☒ Other: <u>not injecting</u>	

WELLHEAD PRESSURES			
If Dual injector, observe & record as (U)pper and (L)ower injection zones			
Injection Tubing	Operator Gauge: ☐ Digital / ☒ Analog	EPA Gauge: ☐ Digital / ☐ Analog	Comments
	Range: <u>2000</u>	ID & Range: <u>D00634</u>	
	Pressure (psi): <u>1000</u>	Pressure (psi): <u>983</u>	
Tubing-Casing Annulus	Operator Gauge: ☐ Digital / ☒ Analog	EPA Gauge: ☐ Digital / ☐ Analog	Comments
	Range: <u>4000</u>	ID & Range:	<u>opened</u>
	Pressure (psi): <u>0</u>	Pressure (psi):	
Bradenhead Annulus	Operator Gauge: ☐ Digital / ☐ Analog	EPA Gauge: ☐ Digital / ☐ Analog	Comments
	Range:	ID & Range:	<u>opened</u>
	Pressure (psi):	Pressure (psi):	

INJECTION RATES & VOLUMES		
If Dual injector, observe & record as (U)pper and (L)ower injection zones		
Injection Rate	☒ BPD / ☐ CFM	Comments
	<u>0</u>	
Cumulative Injection Volume	Is this the lifetime cumulative volume? ☐ Yes / ☐ No	
	☒ BBL / ☐ MCF	Comments
	<u>28907.7</u>	
Pump Shut-off Device	Device(s) Present: ☐ SCADA (Digital) / ☐ Murphy Switch (Analog) / ☐ Physical Pop-off Valve	
	Shutoff Setting (psi)	Comments

PHOTOLOGS	
Photos Taken? ☐ Yes / ☐ No	If Yes, provide Photo Log Addendum

GEOLOGY (ft KB)				CONSTRUCTION (ft KB)		
	Name	Top	Bottom		Top	Bottom
Lowest USDW				Surface Csg:		
Upper Confining Zone				Interm Csg 1:		
Injection Zone				Interm Csg 2:		
				Prod Csg:		
				Liner:		
				Tubing:		
				Perf Interval:		
				Packer Depth:		

	ADDITIONAL COMMENTS
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 Inspector Signature



 Inspector Signature

 Inspector Signature