1349556

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form U3C
June 2015
Form must be Typed
Form must be completed on a per well basis

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 3553
Name: Citation Oil & Gas Corp.
Address 1: 14077 CUTTEN RD
Address 2: PO BOX 690688
City: HOUSTON State: TX Zip: 77269 + 0688
Contact Person: GRISELDA MEDINA
Phone: (281) 891-1000
Lease Name: SITES SWD
Well Number: 3

API No.: 15-051-19048-00-00
Permit No: D06366.0
Reporting Year: 2016
(January 1 to December 31)

____ - SE - SE - SW Sec. 12 Twp. 11 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
97 feet from ☐ N / ☑ S Line of Section
2873 feet from ☑ E / ☐ W Line of Section
County: Ellis

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: ____ mg/l Specific Gravity: ____ Additives: ____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 20000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: ____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	102696	-3	0		31
February	94207	-3	0		29
March	96163	-3	0		31
April	90165	-3	0		30
May	91822	-3	0		31
June	88463	-3	0		30
July	91907	-3	0		31
August	91057	-3	0		31
September	86636	-3	0		30
October	91783	-3	0		31
November	88838	-3	0		30
December	92714	-3	0		31
TOTAL	1106451		0		

Submitted Electronically