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: ANSON WEST
Well Number: B-7W-1

API No.: 15-191-10139-00-00
Permit No: E13989.3
Reporting Year: 2017
(January 1 to December 31)

____ - E2 - SE - SE Sec. 1 Twp. 31 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
644 feet from ☐ N / ☑ S Line of Section
353 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: 1000 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1000 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	11649	-23	0		31
February	9211	-22	0		28
March	11403	-21	0		31
April	9587	-22	0		30
May	11249	-23	0		31
June	11397	-28	0		30
July	9778	-23	0		31
August	9244	-23	0		31
September	8108	-24	0		29
October	9888	-25	0		31
November	10597	-25	0		30
December	9160	-25	0		31
TOTAL	121271		0		

Submitted Electronically