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: ELRICK UNIT
Well Number: 6-0

API No.: 15-065-19224-00-02
Permit No:
Reporting Year: 2017
(January 1 to December 31)

S2 - NW - NW - SE Sec. 10 Twp. 10 S. R. 25 ☐ E ☑ W
(Q/Q/Q/Q)
2217 feet from ☐ N / ☑ S Line of Section
2327 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 2000 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	14415	-22	0		31
February	13552	-26	0		28
March	14756	-23	0		31
April	13280	-28	0		30
May	11829	-30	0		30
June	12685	-30	0		30
July	13950	-30	0		31
August	14316	-20	0		31
September	12180	-20	0		30
October	11036	-18	0		30
November	10368	-20	0		30
December	10937	-18	0		30
TOTAL	153304		0		

Submitted Electronically