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: SIEFKES A
Well Number: 4

API No.: 15-185-13148-00-01
Permit No: D19560.0
Reporting Year: 2018
(January 1 to December 31)

NW - NE - SE - NE Sec. 34 Twp. 21 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
3747 feet from ☐ N / ☑ S Line of Section
641 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: 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	15338	-25	0		31
February	11870	-24	0		28
March	11514	-23	0		31
April	15892	-24	0		30
May	16330	-21	0		31
June	16276	-22	0		30
July	16299	-24	0		31
August	15959	-20	0		31
September	14710	-19	0		30
October	16049	-22	0		31
November	14583	-19	0		30
December	15143	-21	0		31
TOTAL	179963		0		

Submitted Electronically