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: WASINGER B (7)
Well Number: 17

API No.: 15-051-19142-00-02
Permit No: D03065.0
Reporting Year: 2019
(January 1 to December 31)

____ - SE - NE - NE Sec. 21 Twp. 11 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
4277 feet from ☐ N / ☑ S Line of Section
423 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: 100 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	98420	-18	0		31
February	86942	-19	0		28
March	95186	-18	0		31
April	85359	-18	0		30
May	95771	0	0		31
June	91025	-23	0		30
July	95288	-24	0		31
August	92806	-23	0		31
September	90680	-23	0		30
October	87327	-23	0		31
November	95640	-21	0		30
December	98456	-23	0		31
TOTAL	1112900		0		

Submitted Electronically