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: WIELAND UNIT
Well Number: 4-7

API No.: 15-051-01086-00-02
Permit No: E10416.17
Reporting Year: 2019
(January 1 to December 31)

____ - W2 - NE - NE Sec. 1 Twp. 13 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
4704 feet from ☐ N / ☑ S Line of Section
942 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: 1000 psi Injection Zone: TOPEKA
Maximum Authorized Injection Rate: 3000 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	14744	420	0		31
February	13547	420	0		28
March	13642	440	0		31
April	13808	440	0		30
May	12982	500	0		31
June	13867	500	0		30
July	14055	540	0		31
August	14295	500	0		31
September	13269	480	0		30
October	14809	480	0		31
November	13984	480	0		30
December	14666	480	0		31
TOTAL	167668		0		

Submitted Electronically