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: D19561.0
Reporting Year: 2020
(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	9858	-14	0	0	31
February	9251	-18	0	0	29
March	9610	-10	0	0	31
April	1044	-14	0	0	30
May	10230	-10	0	0	31
June	9420	-10	0	0	30
July	9951	-8	0	0	31
August	9486	-20	0	0	31
September	9120	0	0	0	30
October	9362	0	0	0	31
November	9540	-10	0	0	30
December	10106	-22	0	0	31
TOTAL	106978		0		

Submitted Electronically