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: HITZ
Well Number: 1

API No.: 15-185-11168-00-01
Permit No: D17801.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - SE - NW Sec. 7 Twp. 22 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
3282 feet from ☐ N / ☑ S Line of Section
3344 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: 150 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	14739	-22	0	0	29
February	15787	-22	0	0	29
March	16365	-22	0	0	31
April	8135	-23	0	0	30
May	8570	-22	0	0	31
June	17140	-25	0	0	30
July	16707	-25	0	0	31
August	16850	-24	0	0	31
September	16150	0	0	0	30
October	16285	0	0	0	31
November	14415	-24	0	0	30
December	16468	-24	0	0	31
TOTAL	177611		0		

Submitted Electronically