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: ANSON WEST
Well Number: B-7W-1

API No.: 15-191-10139-00-00
Permit No: E13989.3
Reporting Year: 2020
(January 1 to December 31)

____ - E2 - SE - SE Sec. 1 Twp. 31 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
644 feet from ☐ N / ☑ S Line of Section
353 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: MISSISSIPPIAN
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	8426	-29	0	0	31
February	8346	-29	0	0	29
March	8046	-29	0	0	31
April	1230	-25	0	0	30
May	1220	-29	0	0	31
June	1206	-29	0	0	30
July	1148	-29	0	0	31
August	1040	-28	0	0	31
September	6105	0	0	0	30
October	7544	0	0	0	31
November	7227	-28	0	0	30
December	7582	-28	0	0	31
TOTAL	59120		0		

Submitted Electronically