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: COLBERG
Well Number: W-01

API No.: 15-195-00933-00-02
Permit No: D27238.0
Reporting Year: 2023
(January 1 to December 31)

NE - NW - NW - NW Sec. 27 Twp. 14 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
5093 feet from ☐ N / ☑ S Line of Section
5016 feet from ☑ E / ☐ W Line of Section
County: Trego

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: 200 psi Injection Zone: ARBUCKLE,CHEROKEE
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	3661	-20	0	0	31
February	3498	-20	0	0	28
March	4247	-20	0	0	31
April	4110	-20	0	0	30
May	4067	-20	0	0	31
June	3840	-20	0	0	30
July	4012	-20	0	0	31
August	4197	-20	0	0	31
September	4110	-20	0	0	30
October	3777	-20	0	0	31
November	3482	-20	0	0	30
December	4216	-20	0	0	31
TOTAL	47217		0		

Submitted Electronically