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: 4-13

API No.: 15-051-24297-00-01
Permit No: E10416.14
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NE - NE Sec. 1 Twp. 13 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
5171 feet from ☐ N / ☑ S Line of Section
181 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	10831	-28	0	0	31
February	10461	-28	0	0	27
March	10892	-28	0	0	31
April	9444	-28	0	0	30
May	10653	-28	0	0	31
June	11623	-28	0	0	30
July	11607	-28	0	0	31
August	11152	-28	0	0	31
September	11050	-28	0	0	29
October	11950	-28	0	0	31
November	11448	-25	0	0	30
December	12029	-25	0	0	31
TOTAL	133140		0		

Submitted Electronically