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
Well Number: 5-5

API No.: 15-051-04990-00-03
Permit No: D31067.0
Reporting Year: 2024
(January 1 to December 31)

NW - NW - SW - NE Sec. 1 Twp. 13 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
3669 feet from ☐ N / ☑ S Line of Section
2407 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: 350 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 6000 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	15235	0	0	0	31
February	18708	0	0	0	29
March	10501	0	0	0	29
April	9115	0	0	0	30
May	9091	0	0	0	29
June	14591	0	0	0	29
July	5648	0	0	0	31
August	7230	0	0	0	31
September	18991	0	0	0	30
October	8298	0	0	0	31
November	10753	0	0	0	30
December	20001	0	0	0	31
TOTAL	148162		0		

Submitted Electronically