1275691

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 # 6569
Name: Carmen Schmitt, Inc.
Address 1: PO BOX 47
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 0047
Contact Person: Matt Suchy
Phone: (620) 793-5100
Lease Name: DORR UNIT
Well Number: 402W

API No.: 15-163-03613-00-01
Permit No: E09161.5
Reporting Year: 2015
(January 1 to December 31)

____ - SW - NE - SE Sec. 17 Twp. 9 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
1644 feet from ☐ N / ☑ S Line of Section
1123 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 400 psi Injection Zone: DODGE-LSG
Maximum Authorized Injection Rate: 800 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	4237	250	0		31
February	3827	250	0		28
March	4237	250	0		31
April	4100	250	0		30
May	4237	250	0		31
June	4100	250	0		30
July	4237	250	0		31
August	4237	250	0		31
September	4100	250	0		30
October	4237	250	0		31
November	4100	250	0		30
December	4237	250	0		31
TOTAL	49886		0		

Submitted Electronically