1276103

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 # 5150
Name: Colt Energy Inc
Address 1: PO BOX 388
Address 2:
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: BETH WILSON
Phone: (620) 365-3111
Lease Name: Conger
Well Number: SWD 1

API No.: 15-001-30863-00-00
Permit No: D31912.0
Reporting Year: 2015
(January 1 to December 31)

SE - NE - SE - SE Sec. 14 Twp. 25 S. R. 19 ☑ E ☐ W
(Q/Q/Q/Q)
768 feet from ☐ N / ☑ S Line of Section
60 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 250 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 3000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	128	0	0		31
February	178	0	0		28
March	187	0	0		31
April	216	0	0		30
May	233	0	0		31
June	189	0	0		30
July	572	0	0		31
August	181	0	0		31
September	7811	0	0		30
October	8022	0	0		31
November	5174	0	0		30
December	5358	0	0		31
TOTAL	28249		0		

Submitted Electronically