1276381

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 # 32843
Name: LED Enterprises LLC
Address 1: 801 FREDRICK DR.
Address 2:
City: EL DORADO State: KS Zip: 67042 + __ __ __ __
Contact Person: Vic Butler
Phone: (316) 323-7900
Lease Name: SIGMAN
Well Number: 5 A

API No.: 15-015-21012-00-00
Permit No: D19266.0
Reporting Year: 2015
(January 1 to December 31)

____ - S2 - SW - NE Sec. 8 Twp. 26 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
2966 feet from ☐ N / ☑ S Line of Section
1989 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	23250	0	0		31
February	21000	0	0		28
March	23250	0	0		31
April	22500	0	0		30
May	23250	0	0		31
June	22500	0	0		30
July	20250	0	0		27
August	23250	0	0		31
September	22500	0	0		30
October	23250	0	0		31
November	22500	0	0		30
December	23250	0	0		31
TOTAL	270750		0		

Submitted Electronically