1277384

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: Brown, J.C.
Well Number: 1-B

API No.: 15-045-20796-00-01
Permit No: E25508.32
Reporting Year: 2015
(January 1 to December 31)

SW - SW - NW - SE Sec. 14 Twp. 14 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
1460 feet from ☐ N / ☑ S Line of Section
2477 feet from ☑ E / ☐ W Line of Section
County: Douglas

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: 600 psi Injection Zone: SQUIRREL
Maximum Authorized Injection Rate: 30 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 12 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	263	0	0		31
February	198	490	0		28
March	193	490	0		31
April	209	490	0		30
May	199	500	0		31
June	171	500	0		30
July	224	0	0		31
August	162	470	0		1
September	194	480	0		30
October	196	480	0		31
November	208	550	0		30
December	204	580	0		31
TOTAL	2421		0		

Submitted Electronically