1278596

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 # 32955
Name: Kenneth & Regina Laymon, LLC
Address 1: 1998 SQUIRREL Road
Address 2:
City: NEOSHO FALLS State: KS Zip: 66758 + 7124
Contact Person: Kenneth Laymon
Phone: (620) 963-2495
Lease Name: Roberts
Well Number: 8-SWD

API No.: 15-207-02461-00-00
Permit No: D19634.0
Reporting Year: 2015
(January 1 to December 31)

____ - NW - NW - SW Sec. 3 Twp. 24 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
2605 feet from ☐ N / ☑ S Line of Section
5245 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 100 psi Injection Zone: KANSAS CITY
Maximum Authorized Injection Rate: 50 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	930	50	0		31
February	840	50	0		28
March	930	50	0		31
April	900	50	0		30
May	930	50	0		31
June	900	50	0		30
July	930	50	0		31
August	930	50	0		31
September	900	50	0		30
October	930	50	0		31
November	900	50	0		30
December	930	50	0		31
TOTAL	10950		0		

Submitted Electronically