1279259

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 # 5010
Name: Knighton Oil Company, Inc.
Address 1: 1700 N WATERFRONT PKY
Address 2: BLDG 100 STE A
City: WICHITA State: KS Zip: 67206 + __ __ __ __
Contact Person: Earl M. Knighton, Jr
Phone: (316) 630-9905
Lease Name: BERLAND SOL
Well Number: 9

API No.: 15-051-01028-00-02
Permit No: D23681.0
Reporting Year: 2015
(January 1 to December 31)

____ - SE - SE - NE Sec. 28 Twp. 11 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
2991 feet from ☐ N / ☑ S Line of Section
390 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: CEDAR HILLS
Maximum Authorized Injection Rate: 1000 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	26515	0	0		31
February	23915	0	0		28
March	26515	0	0		31
April	25645	0	0		30
May	26515	0	0		31
June	25645	0	0		30
July	26515	0	0		31
August	26515	0	0		31
September	25645	0	0		30
October	26515	0	0		31
November	25645	0	0		30
December	26515	0	0		31
TOTAL	312100		0		

Submitted Electronically