1282584

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 # 3842
Name: Larson Engineering, Inc. dba Larson Operating Company
Address 1: 562 W STATE RD 4
Address 2:
City: OLMITZ State: KS Zip: 67564 + 8561
Contact Person: Tom Larson
Phone: (620) 653-7368
Lease Name: BRUNGARDT UNIT
Well Number: 4

API No.: 15-163-19407-00-01
Permit No: D20784.0
Reporting Year: 2015
(January 1 to December 31)

W2 - NE - SW - SE Sec. 35 Twp. 10 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
985 feet from ☐ N / ☑ S Line of Section
1753 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 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	15052	0	0		31
February	10604	0	0		28
March	13586	0	0		31
April	13462	0	0		30
May	12376	0	0		31
June	13484	0	0		30
July	13707	0	0		31
August	13753	0	0		31
September	13459	0	0		30
October	15366	0	0		31
November	14984	0	0		30
December	15866	0	0		31
TOTAL	165699		0		

Submitted Electronically