1284259

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 # 34592
Name: Kansas Resource Exploration & Development, LLC
Address 1: 9393 W 110TH ST, STE 500
Address 2:
City: OVERLAND PARK State: KS Zip: 66210 + __ __ __ __
Contact Person: Bradley Kramer
Phone: (913) 451-6758
Lease Name: CHISAM
Well Number: 1-W

API No.: 15-121-26912-00-00
Permit No: E13055.40
Reporting Year: 2015
(January 1 to December 31)

____ - SE - NW - SE Sec. 15 Twp. 19 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
2470 feet from ☐ N / ☑ S Line of Section
1392 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 500 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 61 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	22	500	0		31
February	25	500	0		28
March	26	500	0		31
April	28	500	0		30
May	30	500	0		31
June	27	500	0		30
July	42	500	0		31
August	47	500	0		31
September	24	500	0		30
October	28	500	0		31
November	35	500	0		30
December	46	500	0		31
TOTAL	380		0		

Submitted Electronically