1284790

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 # 7054
Name: Doonan and Sons, Inc.
Address 1: PO BOX 1466
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 1466
Contact Person: JR Hartig
Phone: (620) 793-3563
Lease Name: STECKEL
Well Number: 1

API No.: 15-009-04870-00-01
Permit No: D26400.0
Reporting Year: 2015
(January 1 to December 31)

___ - SE - SW - SW Sec. 5 Twp. 20 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
328 feet from ☐ N / ☑ S Line of Section
4443 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 450 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	11780	0	0		31
February	10640	0	0		28
March	11780	0	0		31
April	11400	0	0		30
May	11780	0	0		31
June	11400	0	0		30
July	11780	0	0		31
August	11780	0	0		31
September	11400	0	0		30
October	11780	0	0		31
November	11400	0	0		30
December	11780	0	0		31
TOTAL	138700		0		

Submitted Electronically