1286178

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 # 33905
Name: Royal Drilling Inc
Address 1: 719 WITT AVE
Address 2: PO BOX 342
City: RUSSELL State: KS Zip: 67665 + ___ ___ ___ ___
Contact Person: Sherry Payne
Phone: (785) 483-6446
Lease Name: CARTER
Well Number: 3

API No.: 15-167-02174-00-01
Permit No: D19955.0
Reporting Year: 2015
(January 1 to December 31)

___ - SE - SE - SE Sec. 8 Twp. 14 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
357 feet from ☐ N / ☑ S Line of Section
398 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 1000 Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Cedar Hill
Maximum Authorized Injection Rate: 80 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	1550	0	0		31
February	1400	0	0		28
March	1550	0	0		31
April	1500	0	0		30
May	1550	0	0		31
June	1500	0	0		30
July	1550	0	0		31
August	1550	0	0		31
September	1500	0	0		30
October	1550	0	0		31
November	0		0		
December	0		0		
TOTAL	15200		0		

Submitted Electronically