KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1286871

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 # 33343
Name: PostRock Midcontinent Production LLC
Address 1: OKLAHOMA TOWER
Address 2: 210 PARK AVE, STE 2750
City: OKLAHOMA CITY State: OK Zip: 73102 + ____
Contact Person: JENNIFER R BEAL
Phone: (620) 4324200
Lease Name: PAYNE SWD
Well Number: 20-1

API No.: 15-099-24427-00-00
Permit No: D30208.0
Reporting Year: 2015
(January 1 to December 31)

____ - SW - SW - NW Sec. 20 Twp. 34 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
2716 feet from ☐ N / ☑ S Line of Section
5157 feet from ☑ E / ☐ W Line of Section
County: Labette

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: CORROSION CHEMICALS/SURFACE
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 300 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 8000 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	58220	85	0		31
February	48678	85	0		28
March	47890	85	0		31
April	51567	85	0		30
May	44905	85	0		31
June	54678	85	0		30
July	49876	85	0		31
August	54678	85	0		31
September	48979	85	0		30
October	55989	85	0		31
November	59888	85	0		30
December	57689	85	0		31
TOTAL	633037		0		

Submitted Electronically