1287967

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 # 34047
Name: Ron-Bob Oil LLC
Address 1: 1607 MAIN ST.
Address 2:
City: NEOSHO FALLS State: KS Zip: 66758 + 4033
Contact Person: ROBERT CHRIESTENSON
Phone: (620) 365-0919
Lease Name: WOLFE
Well Number: 13-B

API No.: 15-207-21541-00-01
Permit No: E24747.1
Reporting Year: 2015
(January 1 to December 31)

____ - SW - NW - NE Sec. 24 Twp. 23 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
4290 feet from ☐ N / ☑ S Line of Section
2400 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 350 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 40 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	930	250	0		31
February	840	250	0		28
March	925	250	0		31
April	910	250	0		30
May	930	250	0		31
June	915	250	0		30
July	935	250	0		31
August	935	250	0		31
September	915	250	0		30
October	930	250	0		31
November	915	250	0		30
December	935	250	0		31
TOTAL	11015		0		

Submitted Electronically