1288389

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 # 33192
Name: Crown Energy Company
Address 1: 1117 N.W. 24TH ST.
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73106 + __ __ __ __
Contact Person: Dan Flowers
Phone: (316) 321-0550
Lease Name: KIRKPATRICK
Well Number: 2

API No.: 15-015-40327-00-01
Permit No: E20606.1
Reporting Year: 2015
(January 1 to December 31)

____ - NW - NW - SE Sec. 20 Twp. 28 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
2525 feet from ☐ N / ☑ S Line of Section
2421 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 250 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	4500	0	0		30
February	3600	0	0		24
March	3600	0	0		24
April	3450	0	0		23
May	2250	0	0		15
June	4200	0	0		28
July	4500	0	0		30
August	4600	0	0		31
September	4500	0	0		30
October	4650	0	0		31
November	600	0	0		4
December	0		0		
TOTAL	40450		0		

Submitted Electronically