1290149

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 # 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 BEAL
Phone: (620) 4324200
Lease Name: GROSDIDIER, FRANCIS E
Well Number: 15-30

API No.: 15-133-27756-00-00
Permit No: E31655.2
Reporting Year: 2015
(January 1 to December 31)

NE - NE - SE - SE Sec. 15 Twp. 28 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
1140 feet from ☐ N / ☑ S Line of Section
315 feet from ☑ E / ☐ W Line of Section
County: Neosho

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: 325 psi Injection Zone: CATTLEMAN
Maximum Authorized Injection Rate: 500 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	310	125	0		31
February	280	125	0		28
March	310	125	0		31
April	300	125	0		30
May	310	125	0		31
June	300	125	0		30
July	310	125	0		31
August	310	125	0		31
September	300	125	0		30
October	310	125	0		31
November	300	125	0		30
December	310	125	0		31
TOTAL	3650		0		

Submitted Electronically