1290176

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: LINDGREN
Well Number: 4

API No.: 15-015-20947-00-01
Permit No: D19109.0
Reporting Year: 2015
*(January 1 to December 31)*

____ - NE - SE - NE Sec. 9 Twp. 28 S. R. 6 ☑ E ☐ W
*(Q/Q/Q/Q)*
3570 feet from ☐ N / ☑ S Line of Section
316 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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2500 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 | 11700 | 0 | 0 | | 31 |
| February | 10580 | 0 | 0 | | 28 |
| March | 11800 | 0 | 0 | | 31 |
| April | 7500 | 0 | 0 | | 25 |
| May | 11600 | 0 | 0 | | 31 |
| June | 11400 | 0 | 0 | | 30 |
| July | 11400 | 0 | 0 | | 31 |
| August | 11800 | 0 | 0 | | 31 |
| September | 11400 | 0 | 0 | | 30 |
| October | 11760 | 0 | 0 | | 31 |
| November | 11400 | 0 | 0 | | 30 |
| December | 9800 | 0 | 0 | | 29 |
| ***TOTAL*** | 132140 | | 0 | | |

Submitted Electronically