1304221

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 # 33948
Name: C & J Production LLC
Address 1: 4 FAIRWAY DR
Address 2:
City: MARION State: KS Zip: 66861 + 1139
Contact Person: Michael Sigel
Phone: (620) 382-4084
Lease Name: FEIL
Well Number: 1

API No.: 15-115-21009-00-01
Permit No: D32102.0
Reporting Year: 2015
(January 1 to December 31)

____ - SE - NW - SE Sec. 18 Twp. 21 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
1650 feet from ☐ N / ☑ S Line of Section
1650 feet from ☑ E / ☐ W Line of Section
County: Marion

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,SIMPSON

Maximum Authorized Injection Rate: 3000 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	61998	0	0		31
February	55995	0	0		28
March	616694	0	0		31
April	59991	0	0		30
May	61999	0	0		31
June	59995	0	0		30
July	62001	0	0		31
August	61993	0	0		31
September	59998	0	0		30
October	61999	0	0		31
November	59994	0	0		30
December	61992	0	0		31
TOTAL	1284649		0		

Submitted Electronically