1326619

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 # 30582
Name: Kiser, Michael dba MWK Petroleum Co.
Address 1: 508 STONE LAKE CT
Address 2:
City: AUGUSTA State: KS Zip: 67010 + 2399
Contact Person: MIKE KISER
Phone: (316) 775-5496
Lease Name: RISLEY
Well Number: 6

API No.: 15-015-04362-00-00
Permit No: D07018.0
Reporting Year: 2016
(January 1 to December 31)

____ - SE - SW - NW Sec. 16 Twp. 29 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
2978 feet from ☐ N / ☑ S Line of Section
4417 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: 4000 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	4805	0	0		31
February	4185	0	0		27
March	4805	0	0		31
April	4650	0	0		30
May	4805	0	0		31
June	4650	0	0		30
July	4805	0	0		31
August	4805	0	0		31
September	4340	0	0		28
October	4805	0	0		31
November	4650	0	0		30
December	4650	0	0		30
TOTAL	55955		0		

Submitted Electronically