1328131

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 # 5146
Name: Rains & Williamson Oil Co., Inc.
Address 1: 220 W DOUGLAS STE 110
Address 2:
City: WICHITA State: KS Zip: 67202 + 3104
Contact Person: Juanita Green
Phone: (316) 265-9686
Lease Name: STECKEL
Well Number: 1

API No.: 15-167-04587-00-01
Permit No: E20693.1
Reporting Year: 2016
(January 1 to December 31)

____ - ____ - NE - SW Sec. 18 Twp. 12 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
2098 feet from ☐ N / ☑ S Line of Section
3283 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 200 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 800 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	18135	0	0		31
February	16925	0	0		29
March	18135	0	0		31
April	17550	0	0		30
May	18135	0	0		31
June	17550	0	0		30
July	18135	0	0		31
August	18135	0	0		31
September	17550	0	0		30
October	18135	0	0		31
November	17550	0	0		30
December	18135	0	0		31
TOTAL	214070		0		

Submitted Electronically