1330708

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 # 4313
Name: Walker Tank Service, Inc
Address 1: 128 N GARFIELD AVE
Address 2: PO BOX 117
City: UTICA State: KS Zip: 67584 + 0117
Contact Person: Joann Walker
Phone: (785) 391-2408
Lease Name: PENKA
Well Number: 1

API No.: 15-101-20421-00-00
Permit No: D19779.0
Reporting Year: 2016
(January 1 to December 31)

____ - NE - NE - NE Sec. 3 Twp. 18 S. R. 30 ☐ E ☑ W
(Q/Q/Q/Q)
4927 feet from ☐ N / ☑ S Line of Section
657 feet from ☑ E / ☐ W Line of Section
County: Lane

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: CEDAR HILLS
Maximum Authorized Injection Rate: 750 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	14234	0	0		31
February	12800	0	0		28
March	11719	0	0		31
April	9459	0	0		30
May	11294	0	0		31
June	11779	0	0		30
July	11434	0	0		31
August	9700	0	0		31
September	11309	0	0		30
October	11860	0	0		31
November	11624	0	0		30
December	12415	0	0		31
TOTAL	139627		0		

Submitted Electronically