1331330

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 # 5150
Name: Colt Energy Inc
Address 1: PO BOX 388
Address 2:
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: Bethany Wilson
Phone: (620) 365-3111
Lease Name: MUELLER
Well Number: DEI 3

API No.: 15-125-31969-00-00
Permit No: E30761.2
Reporting Year: 2016
(January 1 to December 31)

____ - SW - NW - SE Sec. 14 Twp. 32 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
1680 feet from ☐ N / ☑ S Line of Section
4421 feet from ☑ E / ☐ W Line of Section
County: Montgomery

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: 0 Additives: Inhibitor & biocide
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Marmaton
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0		0		
February	0		0		
March	0		0		
April	26	0	0		5
May	54	0	0		7
June	50	0	0		6
July	37	0	0		6
August	49	0	0		7
September	42	0	0		8
October	56	0	0		5
November	68	0	0		8
December	0		0		
TOTAL	382		0		

Submitted Electronically