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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 # 6039
Name: L. D. Drilling, Inc.
Address 1: 7 SW 26TH AVE
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: Susan Schneweis
Phone: (620) 793-3051
Lease Name: HEYEN SWD
Well Number: 4

API No.: 15-185-01010-00-02
Permit No: D24533.0
Reporting Year: 2016
(January 1 to December 31)

____ - NE - SE - NW Sec. 24 Twp. 22 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
3667 feet from ☐ N / ☑ S Line of Section
1025 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: 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	29929	0	0		31
February	27290	0	0		29
March	28737	0	0		31
April	25350	0	0		30
May	26001	0	0		31
June	24901	0	0		30
July	26011	0	0		31
August	24181	0	0		31
September	23891	0	0		30
October	25140	0	0		31
November	25711	0	0		30
December	26630	0	0		31
TOTAL	313772		0		

Submitted Electronically