1337280

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 # 3942
Name: Monroe, Orville dba Big "O"
Address 1: 2820 PASEO DR
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 7225
Contact Person: Tim Dickson
Phone: (620) 792-2868
Lease Name: J DENKER
Well Number: 8

API No.: 15-185-22355-00-00
Permit No: D24657.0
Reporting Year: 2016
(January 1 to December 31)

____ - E2 - E2 - SW Sec. 10 Twp. 22 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
1331 feet from ☐ N / ☑ S Line of Section
3001 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	48500	0	0		31
February	47500	0	0		29
March	48900	0	0		31
April	48500	0	0		30
May	49000	0	0		31
June	46000	0	0		30
July	45300	0	0		31
August	43900	0	0		31
September	45000	0	0		30
October	49000	0	0		31
November	48000	0	0		30
December	49000	0	0		31
TOTAL	568600		0		

Submitted Electronically