1339160

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 # 3833
Name: Peak Operating LLC
Address 1: 4625 N. SPYGLASS ST.
Address 2:
City: WICHITA State: KS Zip: 67226 + __ __ __ __
Contact Person: John Shaida
Phone: (316) 304-3444
Lease Name: KRUG A
Well Number: 1

API No.: 15-167-22237-00-01
Permit No: D23209.0
Reporting Year: 2016
(January 1 to December 31)

____ - NW - SW - SE Sec. 24 Twp. 15 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
3052 feet from ☐ N / ☑ S Line of Section
4299 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: 100 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	46619	0	0		31
February	42914	0	0		29
March	44160	0	0		30
April	41929	0	0		29
May	42702	0	0		30
June	42950	0	0		29
July	42494	0	0		30
August	43560	0	0		31
September	39833	0	0		29
October	43685	0	0		30
November	40666	0	0		30
December	42893	0	0		31
TOTAL	514405		0		

Submitted Electronically