KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1340877

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 # 4058
Name: American Warrior, Inc.
Address 1: PO BOX 399
Address 2:
City: GARDEN CITY State: KS Zip: 67846 + ____
Contact Person: Kevin Wiles
Phone: (620) 275-2963
Lease Name: HILL CITY HIGH SCHOOL
Well Number: 5

API No.: 15-065-01552-00-01
Permit No: E28555.1
Reporting Year: 2016
(January 1 to December 31)

____ - SE - NW - SW Sec. 26 Twp. 9 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
1325 feet from ☐ N / ☑ S Line of Section
2367 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 1000 psi Injection Zone: Lansing
Maximum Authorized Injection Rate: 1500 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	3317	0	0		31
February	3120	0	0		29
March	3317	0	0		31
April	3210	0	0		30
May	3317	0	0		31
June	3210	0	0		30
July	3317	0	0		31
August	3317	0	0		31
September	3210	0	0		30
October	3317	0	0		31
November	3210	0	0		30
December	3317	0	0		31
TOTAL	39179		0		

Submitted Electronically