1344221

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 # 7054
Name: Doonan and Sons, Inc.
Address 1: PO BOX 1466
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 1466
Contact Person: JR Hartig
Phone: (620) 793-3563
Lease Name: ARTZ
Well Number: 1

API No.: 15-009-06890-00-00
Permit No: D03612.0
Reporting Year: 2016
(January 1 to December 31)

____ - SW - NW - SW Sec. 29 Twp. 19 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
1660 feet from ☐ N / ☑ S Line of Section
5029 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 3400 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	12400	0	0		31
February	11200	0	0		28
March	12400	0	0		31
April	12000	0	0		30
May	12400	0	0		31
June	12000	0	0		30
July	12400	0	0		31
August	12400	0	0		31
September	12000	0	0		30
October	12400	0	0		31
November	12000	0	0		30
December	12400	0	0		31
TOTAL	146000		0		

Submitted Electronically