1345552

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 # 5552
Name: Gore Oil Company
Address 1: 202 S ST FRANCIS
Address 2: PO BOX 2757
City: WICHITA State: KS Zip: 67202 + 4518
Contact Person: Becky Crawford
Phone: (316) 263-3535
Lease Name: RAY SWD
Well Number: 4

API No.: 15-153-20790-00-02
Permit No: D26664.0
Reporting Year: 2016
(January 1 to December 31)

____ - SE - SE - SW Sec. 36 Twp. 1 S. R. 36 ☐ E ☑ W
(Q/Q/Q/Q)
326 feet from ☐ N / ☑ S Line of Section
1074 feet from ☑ E / ☐ W Line of Section
County: Rawlins

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: 500 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	43266	-30	0		31
February	44377	-30	0		29
March	44377	-30	0		31
April	44377	-30	0		30
May	44377	-30	0		31
June	44377	-30	0		30
July	44377	-30	0		31
August	44377	-35	0		31
September	44377	-30	0		30
October	44377	-30	0		31
November	44377	-30	0		30
December	44377	-35	0		31
TOTAL	531413		0		

Submitted Electronically