

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

1349168

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 #              |  |  |                           | API No.:                  |                         |  |         |        |             |   |  |                        |           |
|--|--|--|---------------------------|---------------------------|-------------------------|--|---------|--------|-------------|---|--|------------------------|-----------|
|  |  |  |                           |                           |                         |  | Addre   | ess 2: |             |   |  | (January 1 to December | 31)       |
|  |  |  |                           |                           |                         |  | City: _ |        | State: Zip: | + |  | Sec Twp S.             | R 🔲 E 🔲 V |
| Contact Person:  Phone: ( )  Lease Name: |  |  |                           | (0/0/0/0)                 | feet from N /           | feet from N / S Line of Section  feet from E / W Line of Section |         |        |             |   |  |                        |           |
|  |  |  |                           |                           | feet from E /           |  |         |        |             |   |  |                        |           |
|  |  |  |                           | County:                   |                         |  |         |        |             |   |  |                        |           |
| Well N                                   | Number:  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
| I. Inje                                  | ection 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 Gra |  | rity: Additives           | :                         |                         |  |         |        |             |   |  |                        |           |
|  | (Attach water analysi                              | is, if available)  |                           |                           |                         |  |         |        |             |   |  |                        |           |
| ı  | Maximum Authorized                                 | I Injection Pressure: I Injection Rate: anced Recovery Injection Wells | barrels per da            | ay                        | :                       |  |         |        |             |   |  |                        |           |
| III.                                     | Month:   | Total Fluid Injected<br>BBL  | Maximum Fluid<br>Pressure | Total Gas Injected<br>MCF | Maximum Gas<br>Pressure | # Days of<br>Injection   |         |        |             |   |  |                        |           |
|  | January  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | February   |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | March  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | April  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | May  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | June   | -  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | July   |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | August   |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | September  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | October  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | November   |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | December   |  |                           |                           |                         |  |         |        |             |   |  |                        |           |
|  | TOTAL  |  |                           |                           |                         |  |         |        |             |   |  |                        |           |