1349502

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 # 31528
Name: Mike Kelso Oil, Inc.
Address 1: PO BOX 467
Address 2:
City: CHASE State: KS Zip: 67524 + 0467
Contact Person: Dianne Willesden
Phone: (620) 793-6032
Lease Name: DOHRMAN ADOBE
Well Number: 1

API No.: 15-053-20778-00-00
Permit No: D21449.0
Reporting Year: 2016
(January 1 to December 31)

____ - SW - NW - NW Sec. 34 Twp. 17 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
2301 feet from ☐ N / ☑ S Line of Section
5025 feet from ☑ E / ☐ W Line of Section
County: Ellsworth

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: NO mg/l Specific Gravity: NO Additives: NO
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 100 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 4500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0		0		
February	0		0		
March	0		0		
April	0		0		
May	0		0		
June	0		0		
July	0		0		
August	0		0		
September	0		0		
October	0		0		
November	0		0		
December	0		0		
TOTAL	0		0		

Submitted Electronically