



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 # _____
Name: _____
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____
Contact Person: _____
Phone: (_____) _____
Lease Name: _____
Well Number: _____

API No.: _____
Permit No.: _____
Reporting Year: _____
(January 1 to December 31)
____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)
_____ feet from N / S Line of Section
_____ feet from E / W Line of Section
County: _____

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: _____ psi Injection Zone: _____
Maximum Authorized Injection Rate: _____ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Summary of Changes

Lease Name and Number: WOLF A 1

Doc ID: 1349800

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	03/21/2016	03/27/2017
Number of Days of Injection, August	31	29
Number of Days of Injection, December	31	29
Number of Days of Injection, February	26	28
Number of Days of Injection, January	28	27
Number of Days of Injection, March	31	30
Number of Days of Injection, November	30	29
Reporting Year	2015	2016
Save Link	../kcc/detail/operatorEditDetail.cfm?docID=12	../kcc/detail/operatorEditDetail.cfm?docID=13
Total BBL Injected	98296 18000	49800 17750
Total BBL Injected in August	1550	1450
Total BBL Injected in December	1550	1450

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total BBL Injected in February	1300	1400
Total BBL Injected in January	1400	1350
Total BBL Injected in March	1550	1500
Total BBL Injected in November	1500	1450