

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 1352498

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 # Name: Address 1: | | | | API No.: | | | | | | | | | |
|--|---|------------------------------------|---------------------------|--------------------|------------------------|-----------|------|----------------|--|--|--|--|--|
| | | | | Permit No: | | | | | | | | | |
| | | | | Reporting Year: | | | | | | | | | |
| Addre | ess 2: | | | | (January 1 to December | r 31) | | | | | | | |
| City: State: Tip: | | | | | | | | | | | | | |
| | | | | | | | Well | Number: | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | jection 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 Gravi (Attach water analysis, if available) | | | rity: Additives | : | | | | | | | | |
| | (Allacii walei arialysi | is, ii avaliable) | | | | | | | | | | | |
| II. W | /ell Data: | | | | | | | | | | | | |
| | Maximum Authorized | Injection Pressure: | | psi | : | | | | | | | | |
| | Maximum Authorized | Injection Rate: | barrels per da | ay | | | | | | | | | |
| | Total Number of Enhance | anced Recovery Injection Wells | Covered by this Permit: _ | (Include TA's) | | | | | | | | | |
| III. | Month: | Total Fluid Injected | Maximum Fluid | Total Gas Injected | Maximum Gas | # Days of | | | | | | | |
| | | BBL | Pressure | MCF | Pressure | Injection | | | | | | | |
| | January | | | | | | | | | | | | |
| | February | | | | | | | | | | | | |
| | March | | | | | | | | | | | | |
| | April | | | | | | | | | | | | |
| | Мау | | | | | | | | | | | | |
| | June | | | | | | | | | | | | |
| | July | | | | | | | | | | | | |
| | August | | | | | | | | | | | | |
| | September | | | | | | | | | | | | |
| | October | | | | | | | | | | | | |
| | November | | | | | | | | | | | | |
| | December | | | | | | | | | | | | |
| | TOTAL | | | | | | | | | | | | |