1352534

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 # 33397
Name: Running Foxes Petroleum Inc.
Address 1: 4B INVERNESS CT E. SUITE 120
Address 2: SUITE 120
City: ENGLEWOOD State: CO Zip: 80112 + 5328
Contact Person: Jeff Swanson
Phone: (303) 617-7242
Lease Name: CLEAVER
Well Number: 7-6B INJ

API No.: 15-011-23653-00-00
Permit No: E30085.35
Reporting Year: 2016
(January 1 to December 31)

NE - SW - NW - NE Sec. 6 Twp. 25 S. R. 24 ☑ E ☐ W
(Q/Q/Q/Q)
1585 feet from ☑ N / ☐ S Line of Section
2255 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 450 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 300 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	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