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 # 34997
Name: Casillas Petroleum Corp
Address 1: 348 RD DD
Address 2:
City: SATANTA State: KS Zip: 67870 + __ __ __ __
Contact Person: Melissa Imler
Phone: (620) 276-3693
Lease Name: PLEASANT PRAIRIE UNIT
Well Number: 26

API No.: 15-055-00031-00-01
Permit No: E13423.15
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - SW - NE Sec. 30 Twp. 26 S. R. 34 ☐ E ☑ W
(Q/Q/Q/Q)
3132 feet from ☐ N / ☑ S Line of Section
1875 feet from ☑ E / ☐ W Line of Section
County: Finney

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: 1500 psi Injection Zone: MISSISSIPPI
Maximum Authorized Injection Rate: 6000 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	57097	120	0		31
February	44183	120	0		28
March	48325	120	0		31
April	41396	110	0		30
May	40239	110	0		31
June	54457	140	0		30
July	54307	120	0		31
August	53152	120	0		31
September	47962	120	0		30
October	56299	100	0		31
November	60706	87	0		30
December	65060	127	0		31
TOTAL	623183		0		

Submitted Electronically