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 # 33905
Name: Royal Drilling Inc
Address 1: 719 WITT AVE
Address 2: PO BOX 342
City: RUSSELL State: KS Zip: 67665 + ___ ___ ___ ___
Contact Person: John Driscoll
Phone: (785) 483-6446
Lease Name: KRAUS H
Well Number: 5

API No.: 15-051-19156-00-01
Permit No: D22093.0
Reporting Year: 2017
(January 1 to December 31)

___ - SE - SW - NW Sec. 22 Twp. 14 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
3063 feet from ☐ N / ☑ S Line of Section
4404 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 1500 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	4700	0	0		31
February	4100	0	0		28
March	4600	0	0		31
April	4400	0	0		30
May	4700	0	0		31
June	4500	0	0		30
July	4650	0	0		31
August	4700	0	0		31
September	4450	0	0		30
October	4675	0	0		31
November	4450	0	0		30
December	4700	0	0		31
TOTAL	54625		0		

Submitted Electronically