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 # 34894
Name: Kiowa Producers, LLC
Address 1: 2080 W. BONITA ROAD
Address 2:
City: AVON PARK State: FL Zip: 33825 + __ __ __ __
Contact Person: Wayne Bogner
Phone: (863) 414-7888
Lease Name: KITE
Well Number: 1 W

API No.: 15-133-21215-00-01
Permit No: D20904.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - SE - SE Sec. 32 Twp. 30 S. R. 19 ☑ E ☐ W
(Q/Q/Q/Q)
200 feet from ☐ N / ☑ S Line of Section
1200 feet from ☑ E / ☐ W Line of Section
County: Neosho

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: 100 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 20 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(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	120	0	0		18
June	200	0	0		26
July	250	0	0		29
August	245	0	0		27
September	225	0	0		30
October	230	0	0		30
November	215	0	0		28
December	65	0	0		17
TOTAL	1550		0		

Submitted Electronically