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 # 3842
Name: Larson Engineering, Inc. dba Larson Operating Company
Address 1: 562 W STATE RD 4
Address 2:
City: OLMITZ State: KS Zip: 67564 + 8561
Contact Person: Tom Larson
Phone: (620) 653-7368
Lease Name: MARIT
Well Number: 2-24 SWD

API No.: 15-101-22268-00-01
Permit No: D30826.0
Reporting Year: 2017
(January 1 to December 31)

NW - SE - NE - NW Sec. 24 Twp. 18 S. R. 30 ☐ E ☑ W
(Q/Q/Q/Q)
738 feet from ☑ N / ☐ S Line of Section
2267 feet from ☐ E / ☑ W Line of Section
County: Lane

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: 500 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	10631	0	0		31
February	9373	0	0		28
March	10277	0	0		31
April	9612	0	0		30
May	7383	0	0		31
June	9937	0	0		30
July	10625	0	0		31
August	9996	0	0		31
September	9450	0	0		30
October	10403	0	0		31
November	10282	0	0		30
December	10411	0	0		31
TOTAL	118380		0		

Submitted Electronically