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 # 31900
Name: Nor-West Kansas Oil, L.L.C.
Address 1: 20014 283 HWY
Address 2:
City: WAKEENEY State: KS Zip: 67672 + 2722
Contact Person: Patrick G. Wanker
Phone: ( 785 ) 743-2769
Lease Name: KRANNAWITTER
Well Number: 1

API No.: 15-179-20729-00-01
Permit No: D28354.0
Reporting Year: 2017
*(January 1 to December 31)*

W2 - NE - NE - SE Sec. 4 Twp. 10 S. R. 29 ☐ E ☑ W
*(Q/Q/Q/Q)*
2322 feet from ☐ N / ☑ S Line of Section
508 feet from ☑ E / ☐ W Line of Section
County: Sheridan

**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: 2 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 205 | 0 | 0 | | 31 |
| February | 205 | 0 | 0 | | 28 |
| March | 205 | 0 | 0 | | 31 |
| April | 205 | 0 | 0 | | 30 |
| May | 205 | 0 | 0 | | 31 |
| June | 205 | 0 | 0 | | 30 |
| July | 205 | 0 | 0 | | 31 |
| August | 205 | 0 | 0 | | 31 |
| September | 205 | 0 | 0 | | 30 |
| October | 205 | 0 | 0 | | 31 |
| November | 205 | 0 | 0 | | 30 |
| December | 205 | 0 | 0 | | 31 |
| ***TOTAL*** | 2460 | | 0 | | |

Submitted Electronically