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 # 33345
Name: Bollinger, Jerald
Address 1: 317 S HIGHLAND
Address 2:
City: CHANUTE State: KS Zip: 66720 + 2407
Contact Person: Harry Conley
Phone: (620) 637-4059
Lease Name: BOLLINGER
Well Number: 17

API No.: 15-011-21085-00-01
Permit No: E22048.3
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - NW Sec. 35 Twp. 26 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4785 feet from ☐ N / ☑ S Line of Section
3795 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: Bartlesville
Maximum Authorized Injection Rate: 20 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	0		0		
February	0		0		
March	0		0		
April	15	20	0		30
May	15	20	0		31
June	15	20	0		30
July	15	20	0		31
August	15	20	0		31
September	15	20	0		30
October	15	20	0		31
November	15	20	0		30
December	15	20	0		31
TOTAL	135		0		

Submitted Electronically