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 # 32710
Name: Laymon Oil II, LLC
Address 1: 1998 SQUIRREL RD
Address 2:
City: NEOSHO FALLS State: KS Zip: 66758 + 7124
Contact Person: Regina Laymon
Phone: (620) 963-2495
Lease Name: ROBISON
Well Number: 4

API No.: 15-207-19082-00-02
Permit No: E29065.1
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - SE - NE Sec. 29 Twp. 23 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
1925 feet from ☐ N / ☑ S Line of Section
900 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 400 psi Injection Zone: squirrel
Maximum Authorized Injection Rate: 600 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	2168	250	0		31
February	1861	250	0		28
March	1705	250	0		31
April	1338	250	0		30
May	1700	250	0		31
June	1461	250	0		30
July	1221	250	0		31
August	1394	250	0		31
September	1479	250	0		30
October	1603	250	0		31
November	1626	250	0		30
December	1693	250	0		31
TOTAL	19249		0		

Submitted Electronically