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: WINGRAVE
Well Number: 31-09

API No.: 15-207-27548-00-01
Permit No: E17126.13
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SW - SE Sec. 16 Twp. 24 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
3002 feet from ☐ N / ☑ S Line of Section
4157 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: 600 psi Injection Zone: squirrel
Maximum Authorized Injection Rate: 75 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	209	400	0		17
February	632	400	0		28
March	573	400	0		28
April	421	400	0		27
May	316	400	0		31
June	330	400	0		30
July	372	400	0		27
August	89	400	0		7
September	249	400	0		27
October	138	400	0		27
November	54	400	0		11
December	0		0		
TOTAL	3383		0		

Submitted Electronically