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 # 3833
Name: Peak Operating LLC
Address 1: 4625 N. SPYGLASS ST.
Address 2:
City: WICHITA State: KS Zip: 67226 + __ __ __ __
Contact Person: Grant Shaida
Phone: (316) 304-3444
Lease Name: BAXA
Well Number: 9

API No.: 15-163-23034-00-03
Permit No: D30392.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - SE Sec. 12 Twp. 9 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
3982 feet from ☐ N / ☑ S Line of Section
3143 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: Arbuckle
Maximum Authorized Injection Rate: 2000 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	25692	0	0		30
February	20953	0	0		25
March	21951	0	0		25
April	8855	0	0		19
May	20953	0	0		20
June	14301	0	0		22
July	11641	0	0		17
August	13138	0	0		19
September	11058	0	0		18
October	7151	0	0		12
November	8440	0	0		11
December	7234	0	0		12
TOTAL	171367		0		

Submitted Electronically