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 # 3045
Name: Lang, Kenneth R.
Address 1: 301 W BELLEVUE
Address 2:
City: GARDEN CITY State: KS Zip: 67846 + 2729
Contact Person: Kenneth Lang
Phone: (620) 275-4573
Lease Name: STONE B
Well Number: 3-7

API No.: 15-055-21585-00-01
Permit No: D27523.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - NW - NW Sec. 7 Twp. 26 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
4260 feet from ☐ N / ☑ S Line of Section
4593 feet from ☑ E / ☐ W Line of Section
County: Finney

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: 500 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	2898	0	0		31
February	2605	0	0		28
March	4995	0	0		31
April	3113	0	0		30
May	3320	0	0		31
June	2968	0	0		30
July	2900	0	0		31
August	5140	0	0		31
September	4029	0	0		30
October	4927	0	0		31
November	5756	0	0		30
December	4825	0	0		31
TOTAL	47476		0		

Submitted Electronically