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 # 6039
Name: L. D. Drilling, Inc.
Address 1: 7 SW 26TH AVE
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: Marilyn Davis
Phone: (620) 793-3051
Lease Name: KASSELMAN
Well Number: 3

API No.: 15-185-22425-00-00
Permit No: D25035.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - NE - SW Sec. 13 Twp. 21 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
2062 feet from ☐ N / ☑ S Line of Section
3211 feet from ☑ E / ☐ W Line of Section
County: Stafford

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	1389	0	0		31
February	1204	0	0		28
March	1419	0	0		31
April	1363	0	0		30
May	1395	0	0		31
June	1390	0	0		30
July	1380	0	0		31
August	1390	0	0		31
September	1375	0	0		30
October	1389	0	0		31
November	1384	0	0		30
December	1371	0	0		31
TOTAL	16449		0		

Submitted Electronically