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: EDWARD TOLLE
Well Number: 1

API No.: 15-113-20906-00-00
Permit No: D20679.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NW - NW Sec. 21 Twp. 17 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
4508 feet from ☐ N / ☑ S Line of Section
5090 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 1000 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	8838	0	0		31
February	7980	0	0		28
March	8841	0	0		31
April	7250	0	0		30
May	8849	0	0		31
June	8550	0	0		30
July	8835	0	0		31
August	8550	0	0		31
September	8550	0	0		30
October	9300	0	0		31
November	8640	0	0		30
December	8838	0	0		31
TOTAL	103021		0		

Submitted Electronically