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 # 34374
Name: Legacy Petroleum LLC
Address 1: PO BOX 3336
Address 2:
City: BARTLESVILLE State: OK Zip: 74006 + __ __ __ __
Contact Person: Blaine Haag
Phone: (918) 798-4510
Lease Name: ALFORD JBD
Well Number: 3

API No.: 15-019-26523-00-01
Permit No: E06342.5
Reporting Year: 2017
(January 1 to December 31)

NE - NW - SW - NE Sec. 5 Twp. 34 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3906 feet from ☐ N / ☑ S Line of Section
2162 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 500 psi Injection Zone: WAYSIDE SAND
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	1550	250	0		31
February	1400	200	0		28
March	1550	250	0		31
April	1500	250	0		30
May	1550	250	0		31
June	1500	200	0		30
July	1550	250	0		31
August	1550	200	0		31
September	1500	200	0		30
October	1550	200	0		31
November	1500	200	0		30
December	1550	200	0		31
TOTAL	18250		0		

Submitted Electronically