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 # 34371
Name: Lewis Energy, LLC
Address 1: PO BOX 14004
Address 2:
City: TULSA State: OK Zip: 74159 + __ __ __ __
Contact Person: Leslie Yardy
Phone: (918) 914-3403
Lease Name: STAFFORD
Well Number: 23

API No.: 15-019-19545-00-01
Permit No: E05477.3
Reporting Year: 2017
(January 1 to December 31)

SE - NW - NE - NE Sec. 8 Twp. 34 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4097 feet from ☐ N / ☑ S Line of Section
944 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: 300 psi Injection Zone: WAYSIDE SAND
Maximum Authorized Injection Rate: 300 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	8525	250	0		31
February	7700	250	0		28
March	8525	250	0		31
April	8250	250	0		30
May	8525	250	0		31
June	8250	250	0		30
July	8525	250	0		31
August	8525	250	0		31
September	8250	250	0		30
October	8525	250	0		31
November	8250	250	0		30
December	8525	250	0		31
TOTAL	100375		0		

Submitted Electronically