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 # 33749
Name: Kepley Well Service, LLC
Address 1: 19245 FORD RD
Address 2:
City: CHANUTE State: KS Zip: 66720 + 5498
Contact Person: Mike Kepley
Phone: (620) 433-7196
Lease Name: TAYLOR
Well Number: D-46

API No.: 15-133-02135-00-00
Permit No: E26368.1
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - SE Sec. 33 Twp. 27 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
2145 feet from ☐ N / ☑ S Line of Section
850 feet from ☑ E / ☐ W Line of Section
County: Neosho

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: 700 psi Injection Zone: TUCKER
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0		0		
February	52	300	0		5
March	110	300	0		15
April	92	300	0		13
May	90	300	0		13
June	0		0		
July	126	300	0		20
August	136	300	0		10
September	115	300	0		8
October	42	0	0		30
November	0		0		
December	0		0		
TOTAL	763		0		

Submitted Electronically