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 # 6113
Name: Landmark Resources, Inc.
Address 1: 4900 WOODWAY DR SUITE 880
Address 2:
City: HOUSTON State: TX Zip: 77056 + __ __ __ __
Contact Person: Jeff Wood
Phone: (713) 243-8550
Lease Name: H J VOHS
Well Number: 8

API No.: 15-163-19390-00-00
Permit No: D02403.0
Reporting Year: 2017
(January 1 to December 31)

W2 - SW - SW - NW Sec. 13 Twp. 10 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
2978 feet from ☐ N / ☑ S Line of Section
5057 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: ARBUCKLE
Maximum Authorized Injection Rate: 8500 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	6669	0	0		31
February	6669	0	0		28
March	6669	0	0		31
April	6669	0	0		30
May	6669	0	0		31
June	6674	0	0		30
July	6674	0	0		31
August	6674	0	0		31
September	6666	0	0		30
October	6666	0	0		31
November	6666	0	0		30
December	6674	0	0		31
TOTAL	80039		0		

Submitted Electronically