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 # 5303
Name: Canaday Oil Corporation
Address 1: 6357 CAMPOS LANE
Address 2:
City: WICHITA State: KS Zip: 67204 + __ __ __ __
Contact Person: Chris Millard
Phone: (316) 250-6730
Lease Name: SCHUETTE
Well Number: 4

API No.: 15-033-20163-00-01
Permit No: D22172.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SE - SW Sec. 25 Twp. 31 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
1230 feet from ☐ N / ☑ S Line of Section
2726 feet from ☑ E / ☐ W Line of Section
County: Comanche

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: 250 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 200 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	1750	0	0		31
February	850	0	0		28
March	1800	0	0		31
April	800	0	0		30
May	1700	0	0		31
June	900	0	0		30
July	1725	0	0		31
August	930	0	0		31
September	1650	0	0		30
October	910	0	0		31
November	1650	0	0		30
December	850	0	0		31
TOTAL	15515		0		

Submitted Electronically