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 # 30269
Name: Argent Energy, Inc.
Address 1: 1313 N WEBB RD STE 210
Address 2:
City: WICHITA State: KS Zip: 67206 + 4077
Contact Person: James C Remsberg
Phone: (316) 262-5111
Lease Name: ELMORE RYAN
Well Number: A-1

API No.: 15-135-22544-00-01
Permit No: D23826.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NW - SE Sec. 16 Twp. 18 S. R. 25 ☐ E ☑ W
(Q/Q/Q/Q)
2307 feet from ☐ N / ☑ S Line of Section
2322 feet from ☑ E / ☐ W Line of Section
County: Ness

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: 150 psi Injection Zone: CEDAR HILLS
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	5300	0	0		31
February	5200	0	0		28
March	5350	0	0		31
April	5400	0	0		30
May	5450	0	0		31
June	5400	0	0		30
July	5450	0	0		31
August	5450	0	0		31
September	5375	0	0		30
October	5400	0	0		31
November	5350	0	0		30
December	5300	0	0		31
TOTAL	64425		0		

Submitted Electronically