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 # 34352
Name: N-10 Exploration, LLC
Address 1: 124 N MAIN
Address 2: PO BOX 195
City: ATTICA State: KS Zip: 67009 + __ __ __ __
Contact Person: Dustin Newberry
Phone: (620) 254-7251
Lease Name: ROBINSON
Well Number: 2

API No.: 15-077-19019-00-01
Permit No: D21352.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SW - SE Sec. 27 Twp. 31 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
961 feet from ☐ N / ☑ S Line of Section
2323 feet from ☑ E / ☐ W Line of Section
County: Harper

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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2500 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	19200	-25	0		31
February	17600	-25	0		28
March	19200	-25	0		31
April	17800	-25	0		30
May	17300	-25	0		31
June	15000	-25	0		30
July	15000	-25	0		31
August	15000	-25	0		31
September	15000	-25	0		30
October	15000	-25	0		31
November	15000	-25	0		30
December	15000	-25	0		31
TOTAL	196100		0		

Submitted Electronically