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 # 7383
Name: Grady Bolding Corporation
Address 1: 114 NORTH MAIN
Address 2: P.O. BOX 486
City: ELLINWOOD State: KS Zip: 67526 + 0486
Contact Person: Lyle L. Gunn
Phone: (620) 564-2240
Lease Name: GRIZZELL
Well Number: 17-31

API No.: 15-053-21040-00-00
Permit No: D25419.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NW - NW Sec. 31 Twp. 17 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
4277 feet from ☐ N / ☑ S Line of Section
4782 feet from ☑ E / ☐ W Line of Section
County: Ellsworth

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: 10000 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	50995	0	0		31
February	46060	0	0		28
March	50995	0	0		31
April	49350	0	0		30
May	50995	0	0		31
June	49350	0	0		30
July	50995	0	0		31
August	50995	0	0		31
September	49350	0	0		30
October	50995	0	0		31
November	49350	0	0		30
December	50995	0	0		31
TOTAL	600425		0		

Submitted Electronically