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: I. SCHMEIDLER
Well Number: 5

API No.: 15-051-19144-00-00
Permit No: D15631.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SE - SW Sec. 18 Twp. 12 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
1047 feet from ☐ N / ☑ S Line of Section
3788 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 200 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 400 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	11408	0	0		31
February	10304	0	0		28
March	11408	0	0		31
April	11040	0	0		30
May	11408	0	0		31
June	11040	0	0		30
July	11408	0	0		31
August	11408	0	0		31
September	11040	0	0		30
October	11408	0	0		31
November	11040	0	0		30
December	11408	0	0		31
TOTAL	134320		0		

Submitted Electronically