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 # _____
Name: _____
Address 1: 2201 East Wilshire Blvd
Address 2: _____
City: Oklahoma City State: OK Zip: 73111 + _ _ _ _
Contact Person: Pat Rigual
Phone: (405) 478-0385
Lease Name: BURKETT
Well Number: 14

API No.: 15-019-26056-00-01
Permit No: E25536.3
Reporting Year: 2017
(January 1 to December 31)

NE - NW - NW - SE Sec. 8 Twp. 34 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
2381 feet from ☐ N / ☑ S Line of Section
2064 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 300 psi Injection Zone: SKINNER
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	1240	225	0		31
February	1120	225	0		28
March	1240	225	0		31
April	1200	225	0		30
May	1240	225	0		31
June	1200	225	0		30
July	1240	225	0		31
August	1240	225	0		31
September	1200	225	0		30
October	1240	225	0		31
November	1200	225	0		30
December	1240	225	0		31
TOTAL	14600		0		

Submitted Electronically