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 # 33005
Name: Randon Production Company Inc.
Address 1: 2863 SUNFLOWER
Address 2:
City: MARION State: KS Zip: 66861 + __ __ __ __
Contact Person: KATHY SVITAK
Phone: (620) 924-5774
Lease Name: SOCOLOFSKY
Well Number: 4

API No.: 15-115-20481-00-01
Permit No: E27733.1
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - NW Sec. 35 Twp. 19 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
5029 feet from ☐ N / ☑ S Line of Section
3831 feet from ☑ E / ☐ W Line of Section
County: Marion

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: 800 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	150	0	0		5
February	150	0	0		5
March	150	0	0		5
April	150	0	0		5
May	150	0	0		5
June	150	0	0		5
July	750	0	0		15
August	150	0	0		5
September	750	0	0		15
October	1500	0	0		31
November	1500	0	0		30
December	750	0	0		15
TOTAL	6300		0		

Submitted Electronically