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 # 35229
Name: West Place Crude, LLC
Address 1: 23062 FARLIN RD
Address 2:
City: PARKER State: KS Zip: 66072 + __ __ __ __
Contact Person: Todd Wollard
Phone: (913) 481-2601
Lease Name: WOLLARD-ABBOTT
Well Number: 61 W

API No.: 15-107-21794-00-01
Permit No: E26341.1
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NE - SE Sec. 28 Twp. 19 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1990 feet from ☐ N / ☑ S Line of Section
670 feet from ☑ E / ☐ W Line of Section
County: Linn

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: 400 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 100 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	0		0		
February	0		0		
March	25	400	0		30
April	25	400	0		30
May	25	400	0		30
June	25	400	0		30
July	25	400	0		30
August	25	400	0		30
September	25	400	0		30
October	25	400	0		30
November	0		0		
December	0		0		
TOTAL	200		0		

Submitted Electronically