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 # 4706
Name: Messenger Petroleum, Inc.
Address 1: 525 S MAIN ST
Address 2:
City: KINGMAN State: KS Zip: 67068 + 1968
Contact Person: Jon F Messenger
Phone: (620) 532-5400
Lease Name: MARLYNE
Well Number: 1

API No.: 15-007-00239-00-01
Permit No: D28465.0
Reporting Year: 2017
(January 1 to December 31)

____ - SE - SE - SE Sec. 2 Twp. 31 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
365 feet from ☐ N / ☑ S Line of Section
268 feet from ☑ E / ☐ W Line of Section
County: Barber

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: SIMPSON,ARBUCKLE
Maximum Authorized Injection Rate: 1000 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	7985	-10	0		31
February	7010	-10	0		29
March	6575	-10	0		31
April	7705	-10	0		30
May	7705	-10	0		31
June	7150	-10	0		30
July	5310	-10	0		31
August	6550	-10	0		31
September	5497	-10	0		30
October	6690	-10	0		31
November	5340	-10	0		30
December	5790	-10	0		31
TOTAL	79307		0		

Submitted Electronically