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: LINDQUIST
Well Number: 1

API No.: 15-095-01012-00-01
Permit No: D26047.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - NW - SE Sec. 24 Twp. 28 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
1980 feet from ☐ N / ☑ S Line of Section
2080 feet from ☑ E / ☐ W Line of Section
County: Kingman

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: ARBUCKLE
Maximum Authorized Injection Rate: 5040 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	3960	-10	0		31
February	4596	-10	0		29
March	4895	-10	0		31
April	5700	-10	0		30
May	4950	-10	0		31
June	4502	-10	0		30
July	5030	-10	0		31
August	4420	-10	0		31
September	4755	-10	0		30
October	3450	-10	0		31
November	4068	-10	0		30
December	4655	-10	0		31
TOTAL	54981		0		

Submitted Electronically