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 # 30717
Name: Downing-Nelson Oil Co Inc
Address 1: PO BOX 1019
Address 2:
City: HAYS State: KS Zip: 67601 + __ __ __ __
Contact Person: Michele Meier
Phone: (785) 621-2610
Lease Name: SCHMIDT B SWD
Well Number: 5

API No.: 15-051-04012-00-02
Permit No: D07493.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SE - NE Sec. 3 Twp. 13 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
3682 feet from ☐ N / ☑ S Line of Section
397 feet from ☑ E / ☐ W Line of Section
County: Ellis

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: NA Additives: None
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: 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	19500	0	0		31
February	18200	0	0		28
March	20150	0	0		31
April	19500	0	0		30
May	20150	0	0		31
June	19500	0	0		30
July	20150	0	0		31
August	20150	0	0		31
September	19500	0	0		30
October	20150	0	0		31
November	19500	0	0		30
December	20150	0	0		31
TOTAL	236600		0		

Submitted Electronically