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 # 33969
Name: Housel, Rick dba Rick's Well Service
Address 1: PO BOX 268
Address 2:
City: CHERRYVALE State: KS Zip: 67335 + 0268
Contact Person: Rick Housel
Phone: (620) 252-8656
Lease Name: SMITH
Well Number: 1 SWD

API No.: 15-125-29251-00-00
Permit No: D25900.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SE - SE Sec. 33 Twp. 31 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
820 feet from ☐ N / ☑ S Line of Section
115 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: 600 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	1000	0	0		30
February	1000	0	0		28
March	1000	0	0		30
April	1200	0	0		30
May	1500	0	0		30
June	1000	0	0		30
July	1000	0	0		30
August	1000	0	0		30
September	1000	0	0		30
October	1200	0	0		30
November	1200	0	0		30
December	1500	0	0		30
TOTAL	13600		0		

Submitted Electronically