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 # 35398
Name: Wilson, David A.
Address 1: 5748 NW US HWY 77
Address 2:
City: EL DORADO State: KS Zip: 67042 + __ __ __ __
Contact Person: David Wilson
Phone: (316) 371-9500
Lease Name: ALTHOUSE
Well Number: 2

API No.: 15-015-22054-00-00
Permit No: D21213.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NW - NE Sec. 2 Twp. 25 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
4048 feet from ☐ N / ☑ S Line of Section
2343 feet from ☑ E / ☐ W Line of Section
County: Butler

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 71000 mg/l Specific Gravity: 1.055 Additives: NA
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 3000 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	400	0	0		10
February	190	0	0		10
March	1170	0	0		10
April	820	0	0		10
May	1650	0	0		10
June	0		0		
July	390	0	0		10
August	880	0	0		10
September	580	0	0		10
October	1080	0	0		10
November	550	0	0		10
December	590	0	0		10
TOTAL	8300		0		

Submitted Electronically