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 # 6279
Name: Patrick Development Corporation
Address 1: 3408 W 93 RD
Address 2:
City: LEAWOOD State: KS Zip: 66206 + 2005
Contact Person: kerry patrick
Phone: (913) 375-8368
Lease Name: GRANDON
Well Number: WW-1

API No.: 15-121-29292-00-00
Permit No: E15557.4
Reporting Year: 2017
(January 1 to December 31)

____ - SW - SW - SW Sec. 9 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
324 feet from ☐ N / ☑ S Line of Section
5019 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 600 psi Injection Zone: SQUIRREL
Maximum Authorized Injection Rate: 30 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 5 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	150	250	0		15
February	150	250	0		15
March	150	250	0		15
April	250	250	0		25
May	250	250	0		25
June	250	250	0		25
July	250	250	0		25
August	250	250	0		25
September	300	250	0		30
October	300	250	0		30
November	250	250	0		25
December	250	250	0		25
TOTAL	2800		0		

Submitted Electronically