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 # 7160
Name: Wrestler, David L., a General Partnership
Address 1: 1776 GEORGIA RD
Address 2:
City: HUMBOLDT State: KS Zip: 66748 + 1500
Contact Person: David Wrestler
Phone: (620) 473-2324
Lease Name: LOREN KORTE
Well Number: 6

API No.: 15-001-28508-00-01
Permit No: E30159.1
Reporting Year: 2017
(January 1 to December 31)

____ - E2 - E2 - NW Sec. 1 Twp. 26 S. R. 19 ☑ E ☐ W
(Q/Q/Q/Q)
3960 feet from ☐ N / ☑ S Line of Section
2970 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 400 psi Injection Zone: CATTLEMAN
Maximum Authorized Injection Rate: 100 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	310	250	0		31
February	280	250	0		28
March	310	250	0		31
April	300	250	0		30
May	310	250	0		31
June	300	250	0		30
July	310	250	0		31
August	310	250	0		31
September	300	250	0		30
October	310	250	0		31
November	300	250	0		30
December	310	250	0		31
TOTAL	3650		0		

Submitted Electronically