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 # 34744
Name: ACL Production, LLC
Address 1: 416 PEARL ST
Address 2:
City: INDEPENDENCE State: KS Zip: 67301 + __ __ __ __
Contact Person: Mike Taylor
Phone: (620) 331-8069
Lease Name: GRUVER
Well Number: 23

API No.: 15-125-27845-00-01
Permit No: E24625.5
Reporting Year: 2017
(January 1 to December 31)

SW - NE - NW - NE Sec. 6 Twp. 33 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
4878 feet from ☐ N / ☑ S Line of Section
1796 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: 350 psi Injection Zone: bartlesville
Maximum Authorized Injection Rate: 200 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	62	325	0		31
February	56	325	0		28
March	62	325	0		31
April	60	325	0		30
May	62	325	0		31
June	60	325	0		30
July	62	325	0		31
August	62	325	0		31
September	60	325	0		30
October	62	325	0		31
November	60	325	0		30
December	62	325	0		31
TOTAL	730		0		

Submitted Electronically