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 # 8925
Name: Liberty Oper & Compl, Inc
Address 1: 100 SW 9TH
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + 2229
Contact Person: Roger L. Comeau
Phone: ( 785 ) 434-4686
Lease Name: STALNAKER (SWD)
Well Number: 2

API No.: 15-163-22821-00-00
Permit No: D24563.0
Reporting Year: 2017
*(January 1 to December 31)*

____ - SW - SW - NE Sec. 30 Twp. 9 S. R. 17 ☐ E ☑ W
*(Q/Q/Q/Q)*
2891 feet from ☐ N / ☑ S Line of Section
2429 feet from ☑ E / ☐ W Line of Section
County: Rooks

**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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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 | 6645 | 0 | 0 | | 31 |
| February | 6002 | 0 | 0 | | 28 |
| March | 6645 | 0 | 0 | | 31 |
| April | 6431 | 0 | 0 | | 30 |
| May | 6645 | 0 | 0 | | 31 |
| June | 6431 | 0 | 0 | | 30 |
| July | 6645 | 0 | 0 | | 31 |
| August | 6645 | 0 | 0 | | 31 |
| September | 6431 | 0 | 0 | | 30 |
| October | 6645 | 0 | 0 | | 31 |
| November | 6431 | 0 | 0 | | 30 |
| December | 6645 | 0 | 0 | | 31 |
| ***TOTAL*** | 78241 | | 0 | | |

Submitted Electronically