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 # 35535
Name: TexKan Resources, LLC
Address 1: PO BOX H
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + __ __ __ __
Contact Person: Bill Robinson
Phone: (785) 688-4040
Lease Name: HAROLD COPELAND
Well Number: 2

API No.: 15-163-02246-00-01
Permit No: D27993.0
Reporting Year: 2018
(January 1 to December 31)

____ - SW - NW - SW Sec. 19 Twp. 9 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
1666 feet from ☐ N / ☑ S Line of Section
4939 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: 100 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 5000 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	5598	0			31
February	5401	0			28
March	5588	0			31
April	5601	0			30
May	5439	0			31
June	5488	0			30
July	5510	0			31
August	5449	0			31
September	5389	0			30
October	5440	0			31
November	5300	0			30
December	5498	0			31
TOTAL	65701		0		

Submitted Electronically