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 # 30582
Name: Kiser, Michael dba MWK Petroleum Co.
Address 1: 508 STONE LAKE CT
Address 2:
City: AUGUSTA State: KS Zip: 67010 + 2399
Contact Person: MIKE KISER
Phone: (316) 775-5496
Lease Name: NEED
Well Number: 3

API No.: 15-015-23088-00-01
Permit No: E26772.1
Reporting Year: 2018
(January 1 to December 31)

SW - SW - NE - NE Sec. 3 Twp. 29 S. R. 6 ☑ E ☐ W
(Q/Q/Q/Q)
4368 feet from ☐ N / ☑ S Line of Section
1035 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 200 psi Injection Zone: KANSAS CITY
Maximum Authorized Injection Rate: 300 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	3720				31
February	3360				28
March	3720				31
April	3600				30
May	3720				31
June	3600				30
July	3720				31
August	3720				31
September	0				
October	0				
November	0				
December	600				5
TOTAL	29760		0		

Submitted Electronically