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 # 35573
Name: River Oil LLC
Address 1: 435 ROAD 28A
Address 2:
City: LONGTON State: KS Zip: 67352 + __ __ __ __
Contact Person: Deanna L Jones
Phone: (620) 642-6000
Lease Name: FRED FINLEY
Well Number: 5

API No.: 15-049-21966-00-00
Permit No: E24129.1
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SE - NW Sec. 13 Twp. 31 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3002 feet from ☐ N / ☑ S Line of Section
2662 feet from ☑ E / ☐ W Line of Section
County: Elk

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: 500 psi Injection Zone: LAYTON
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					
February					
March					
April	0				
May	0				
June	0				
July	0				
August	0				
September	0				
October	0				
November	0				
December	0				
TOTAL	0		0		

Submitted Electronically