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 # 4067
Name: TKO Investments, Inc.
Address 1: 10881 W MCARTOR RD
Address 2:
City: DODGE CITY State: KS Zip: 67801 + 6763
Contact Person: Kevin Tieben
Phone: ( 620 ) 225-0263
Lease Name: JIMMY TIEBEN
Well Number: 1

API No.: 15-057-20263-00-01
Permit No: D25531.0
Reporting Year: 2018
*(January 1 to December 31)*

____ - NW - NW - NE Sec. 5 Twp. 27 S. R. 21 ☐ E ☑ W
*(Q/Q/Q/Q)*
4947 feet from ☐ N / ☑ S Line of Section
2331 feet from ☑ E / ☐ W Line of Section
County: Ford

**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: MISSISSIPPIAN
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 | 500 | 0 | 0 | 0 | 15 |
| February | 495 | 0 | 0 | 0 | 10 |
| March | 500 | 0 | 0 | 0 | 15 |
| April | 500 | 0 | 0 | 0 | 20 |
| May | 450 | 0 | 0 | 0 | 15 |
| June | 500 | 0 | 0 | 0 | 20 |
| July | 500 | 0 | 0 | 0 | 20 |
| August | 450 | 0 | 0 | 0 | 15 |
| September | 500 | 0 | 0 | 0 | 20 |
| October | 400 | 0 | 0 | | 10 |
| November | 450 | 0 | 0 | 0 | 15 |
| December | 400 | 0 | 0 | 0 | 15 |
| ***TOTAL*** | 5645 | | 0 | | |

Submitted Electronically