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 # 3293
Name: Russell Oil, Inc.
Address 1: PO BOX 8050
Address 2:
City: EDMOND State: OK Zip: 73083 + __ __ __ __
Contact Person: LEROY HOLT
Phone: (405) 752-7600
Lease Name: MCNERNEY B
Well Number: 2

API No.: 15-141-20321-00-00
Permit No: D27307.0
Reporting Year: 2018
(January 1 to December 31)

____ - N2 - N2 - SE Sec. 3 Twp. 10 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
2262 feet from ☐ N / ☑ S Line of Section
1315 feet from ☑ E / ☐ W Line of Section
County: Osborne

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: ARBUCKLE
Maximum Authorized Injection Rate: 3000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	10395	0	0	0	31
February	9436	0	0	0	28
March	10447	0	0	0	31
April	10110	0	0	0	30
May	10447	0	0	0	31
June	10110	0	0	0	30
July	10447	0	0	0	31
August	10447	0	0	0	31
September	10110	0	0	0	30
October	10447	0	0	0	31
November	9160	0	0	0	30
December	10447	0	0	0	31
TOTAL	122003		0		

Submitted Electronically