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 # 34883
Name: Area Management Corp
Address 1: 9001 ROE AVE
Address 2:
City: PRAIRIE VILLAGE State: KS Zip: 66207 + __ __ __ __
Contact Person: Lesli Baker
Phone: (913) 648-7700
Lease Name: LONGANECKER
Well Number: I-3

API No.: 15-091-22377-00-00
Permit No: E25490.3
Reporting Year: 2018
(January 1 to December 31)

____ - NW - SE - NE Sec. 30 Twp. 14 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
3826 feet from ☐ N / ☑ S Line of Section
3145 feet from ☑ E / ☐ W Line of Section
County: Johnson

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 650 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 100 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	1207	550	0	0	31
February	1111	550	0	0	28
March	1096	550	0	0	31
April	1088	550	0	0	30
May	1153	550	0	0	31
June	1196	550	0	0	30
July	1086	550	0	0	31
August	1209	550	0	0	31
September	1051	550	0	0	30
October	1216	550	0	0	31
November	1142	550	0	0	30
December	1197	550	0	0	31
TOTAL	13752		0		

Submitted Electronically