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: CARROLL
Well Number: 6

API No.: 15-009-24440-00-00
Permit No: D26149.0
Reporting Year: 2018
(January 1 to December 31)

____ - SE - NE - SE Sec. 21 Twp. 17 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
1624 feet from ☐ N / ☑ S Line of Section
450 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 3500 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	40544	0	0	0	31
February	33844	0	0	0	28
March	41882		0	0	31
April	39658	0	0	0	30
May	38023	0	0	0	31
June	39222	0	0	0	30
July	39718	0	0	0	31
August	41593	0	0	0	31
September	40961	0	0	0	30
October	41496	0	0	0	31
November	40948	0	0	0	30
December	40544	0	0	0	31
TOTAL	478433		0		

Submitted Electronically