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 # 32619
Name: Excel Oil & Gas L.L.C.
Address 1: 10551 BARKLEY ST STE 502
Address 2:
City: OVERLAND PARK State: KS Zip: 66212 + __ __ __ __
Contact Person: Lesli Baker
Phone: (913) 208-9555
Lease Name: SHAFFER
Well Number: RI-3

API No.: 15-121-28630-00-00
Permit No: E30388.7
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SW - NW Sec. 31 Twp. 16 S. R. 24 ☑ E ☐ W
(Q/Q/Q/Q)
1236 feet from ☐ N / ☑ S Line of Section
2720 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 500 psi Injection Zone: Cattleman
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	506	300	0	0	31
February	470	300	0	0	28
March	516	300	0	0	31
April	499	300	0	0	30
May	517	300	0	0	31
June	505	300	0	0	30
July	518	300	0	0	31
August	516	300	0	0	31
September	501	300	0	0	30
October	516	300	0	0	31
November	501	300	0	0	30
December	524	300	0	0	31
TOTAL	6089		0		

Submitted Electronically