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 # 8834
Name: Dyer, Charles Wilbur
Address 1: 2104 RD 23
Address 2:
City: LONGTON State: KS Zip: 67352 + 9008
Contact Person: Dyer, Charles Wilbur
Phone: ( 620 ) 642-3493
Lease Name: DYER
Well Number: 5

API No.: 15-049-20793-00-00
Permit No: D19915.0
Reporting Year: 2018
*(January 1 to December 31)*

SE - NE - SE - NW Sec. 33 Twp. 31 S. R. 12 ☑ E ☐ W
*(Q/Q/Q/Q)*
3617 feet from ☐ N / ☑ S Line of Section
2786 feet from ☑ E / ☐ W Line of Section
County: Elk

**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: 190 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 | 0 | | | | |
| February | 0 | | | | |
| March | 200 | | | | 31 |
| April | 200 | | | | 30 |
| May | 200 | | | | 31 |
| June | 200 | | | | 30 |
| July | 200 | | | | 31 |
| August | 200 | | | | 31 |
| September | 200 | | | | 30 |
| October | 200 | | | | 31 |
| November | 200 | | | | 30 |
| December | 200 | | | | 31 |
| ***TOTAL*** | 2000 | | 0 | | |

Submitted Electronically