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 # 5098
Name: Shelley, Randall D.
Address 1: 212 N. MARKET ST.
Address 2: SUITE 402
City: WICHITA State: KS Zip: 67202 + 2017
Contact Person: Randall Shelley
Phone: (316) 841-4747
Lease Name: TEPPE
Well Number: 2

API No.: 15-167-04418-00-01
Permit No: D04196.0
Reporting Year: 2018
(January 1 to December 31)

____ - NW - SE - NE Sec. 21 Twp. 14 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
3657 feet from ☐ N / ☑ S Line of Section
981 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 50 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2550 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	3534	0	0		31
February	3306	0	0		28
March	3534	0	0		31
April	3420	0	0		30
May	3534	0	0		31
June	3420	0	0		30
July	3534	0	0		31
August	3534	0	0		31
September	3420	0	0		30
October	3534	0	0		31
November	3420	0	0		30
December	3534	0	0		31
TOTAL	41724		0		

Submitted Electronically