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 # 31119
Name: Lone Wolfe Oil & Gas Co., LLC
Address 1: PO BOX 241
Address 2:
City: MOLINE State: KS Zip: 67353 + 0241
Contact Person: Rob Wolfe
Phone: (620) 647-3626
Lease Name: WALKER TRUST
Well Number: 3

API No.: 15-019-26096-00-01
Permit No: E26328.3
Reporting Year: 2018
(January 1 to December 31)

SE - SE - NW - NE Sec. 1 Twp. 32 S. R. 9 ☑ E ☐ W
(Q/Q/Q/Q)
3963 feet from ☐ N / ☑ S Line of Section
1379 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 750 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 900 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	4095	0	0		31
February	3855	0	0		28
March	3990	0	0		31
April	3900	0	0		30
May	4115	0	0		31
June	4060	0	0		30
July	4235	0	0		31
August	4370	0	0		31
September	4120	0	0		30
October	4450	0	0		31
November	4280	0	0		30
December	4415	0	0		31
TOTAL	49885		0		

Submitted Electronically