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 # 31428
Name: Crawford, Jeff dba Lonestar Oil Co
Address 1: PO BOX 205
Address 2:
City: GORHAM State: KS Zip: 67640 + 0205
Contact Person: Jeff Crawford
Phone: (785) 735-4585
Lease Name: MILLS B
Well Number: 8

API No.: 15-167-22653-00-00
Permit No: D24479.0
Reporting Year: 2018
(January 1 to December 31)

____ - NE - NE - SE Sec. 33 Twp. 13 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
330 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: 0 psi Injection Zone: GRANIT WASH
Maximum Authorized Injection Rate: 3000 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	20680	0	0	0	31
February	18678	0	0	0	28
March	20746	0	0	0	31
April	21110	0	0	0	30
May	21380	0	0	0	31
June	21220	0	0	0	30
July	21370	0	0	0	31
August	20410	0	0	0	31
September	20750	0	0	0	30
October	20912	0	0	0	31
November	21460	0	0	0	30
December	22110	0	0	0	31
TOTAL	250826		0		

Submitted Electronically