KOLAR Document ID: 1449937

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.

OPEF	RATOR: License # _			API No.:		
Name	ə:			Permit No:		
Addre	ess 1:			Reporting Year:		
Address 2:					(January 1 to Decembe	r 31)
		State: Zip:			Sec Twp S.	R
-		·		(Q/Q/Q/Q)	feet from N /	
Phone	Phone: ()				feet from E /	
	,			County:		
Well N	Number:			,		
	ection Fluid: Type (Pick one): Source:	Fresh Water	☐ Treated Brine	Untreated Brine	Water/Brine	
		I Dissolved Solids:		rity: Additives:		
	(Attach water analys					
		d Injection Rate:anced Recovery Injection Wells				
III.	Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
	January					
	February					
	March					
	April					_
	May					
	June					
	July					
	August					
	September					
	October					
	November					
	December					
	TOTAL					

CASING MECHANICAL INTEGRITY TEST	DOCKET # <u>E 27/36.9</u>
Disposal Enhanced Recovery:	3W NW SE, Sec 1, T 23 S, R 3/ E/W
Repressuring X Flood X Tertiary	1550 Feet from South Section Line 1980 Feet from East Section Line
Date injection started API #15 -055 -21020 0000	Lease Scott Well # 4-7 W/W County Finney
Operator: PetroSontander (USA)	
Address 6363 Woodway Ste35	Contact Person <u>Vete Kuney</u> Phone <u>620 275-2388</u>
Max. Auth. Injection Press. Will provide the surface of the surfac	si; Max. Inj. Rate $\frac{L(I)(N)}{Injection}$ bbl/d; reproduction Injection below production Tubing Size $\frac{5/2}{A850}$ Set at $\frac{4700}{4850}$ Type $\frac{1100}{1100}$
Type Mit: Pressure X Radioa	ctive Tracer Survey Temperature Survey
F Time: Start <u>O</u> Min. <u>15</u> M I E Pressures: <u>340</u> 340 L D	in. 30 Min. 340 Set up 1 System Pres. during test 840 Set up 2 Annular Pres. during test 340
D A T Tested: Casing or Casin	Set up 3 Fluid loss during test \mathcal{O} bbls. ng - Tubing Annulus \mathcal{L}
A The bottom of the tested zone is	shut in with, a packer
	Alentan ce Hot Oil Sue Company's Equipment
, ,	at the zone between feet and _4702 feet
	Signature Title
	, Marginal, Not Satisfactory Title ECRS Witness: Yes X No
REMARKS: MIT taken after cha	inging out they to TK to in preparation
Orgin. Conservation Div.;	KDHE/T; Dist. Office;
Computer Update 5A	WOULD P KCC Form U-7 6/84

CASING MECHANICAL INTEGRITY TEST	DOCKET # <u>6 27138,9</u>
Disposal Enhanced Recovery:	<u>BW NW SE</u> , Sec 4, T Z3S, R 3/ 8/W
Repressuring X Flood X Tertiary Date injection started	Feet from South Section Line Feet from East Section Line Lease Scaff Well # 4-7 COR
API #15 <u>-055 - 2/070-00</u>	County Kinney
Operator: <u>Petro San tander (USA)</u> To Name & Address 6363 Waschway Ste350	Contact Person Pete Kuney)
Hauston, Tx 77057	Phone 626 275-2388
Size Set at Cement Top Bottom DV/Perf. Packer type Conductor Surface 878 470 470 A70 A70 A70 A70 A70 A70 A70 A70 A70 A	production Injection below production Production Liner Tubing Size 278
Type Mit: Pressure X Radioac	ctive Tracer Survey Temperature Survey
The operator hereby certifies tha	Set up 1 System Pres. during test <u>900</u> Set up 2 Annular Pres. during test <u>520</u> Set up 3 Fluid loss during test <u>0</u> bbls. g - Tubing Annulus X
State Agent Ken Jehlik	Title <u>EC/25</u> Witness: Yes X No pucker. Relation 5 years
Orgin. Conservation Div.;	KDHE/T; Dist. Office;
Computer Update	KCC Form U-7 6/84
GPS entered	SCANNED

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

APPLICATION TO AMEND INJECTION PERMIT

Form U-8 July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Salt Water Disposal	Permit Number: E27 183		
Salt Water Disposal Repressuring Other Enhanced Recovery	SE 1/4 Sec. 4 330 Feet from 2310 Feet from Lease: SCOTT Well #: 4-2	Twp. 23 S. R. 31 North / V South Section Line East / West Section Line	•
	FINNEY Originally granted to: NORTH	I AMERICAN RESOURCES	
(All information above this line taken from the original perm	•		
Current Operator: License # 32198	Contact Person	_{on:} Bill Aspinwall	
Company Name: PetroSantander (USA) Inc.			
Address: 6363 Woodway Drive, Suite 350, Houst	(As listed on operator litton, TX 77057	cense)	
Phone: 713-784-8700	·		
B. Change the authorized injection rate to: C. Add () or delete (by the Conservation Division.			
Company Name 1			- - - -
D. Change the permit by: (X) and () and () change the injection formation and AUTHORITY TO INJECT UP	ation; or () change well co	nstruction; or (X) other:	_;

Offset Operators, Unleased Mineral Owners and Landowners

(Attach additional sheets if necessary)

Name	SEE ATTACHED LIST	Legal Description of Leasehold
	I hereby certify that the statements made herei	in are true and correct to the best of my knowledge and belief.
		Applicant on Duly Authorized Agent
		Applicant or Duly Authorized Agent
	Subscribed and sworn to before me this	day of
		Notary Public
	My Commission Expires:	
	, 00	

Instructions for Form U-8

Application to Amend Injection Permit

- 1. All requested changes in injection authority must be submitted with this form.
- 2. Complete the top portion, (side 1) of the form with the information requested for the pilot well, as shown on the original order or permit.
- 3. Complete the current operator information, listing the license number, current name and address, contact person and phone number.
- 4. Fill in the type of change or amendment desired. Leave blank any sections not applicable.
- 5. For amendments adding additional input wells to enhanced recovery permits, the following information must be submitted in addition to pages 1 and 2 of form U-8:
 - a) pages 1 and 2 of form U-1
 - b) an updated map, showing the new well(s) and all existing wells; page 4 of the form U-1.
 - c) a complete log of the well(s) to be added;
 - d) verification of cement (cement tickets, bond log, etc.)
- 6. Attach Affidavit of Notice Served, page 5 of form U-1.
- 7. Attach Affidavit of Publication from the official county newspaper.
- 8. This form must be signed by the applicant or an authorized agent. A notarization of the signature is required.
- 9. All applicable fees must accompany this application.

ATTACHMENT FOR PAGE 3, U-1 APPLICATION FOR INJECTION WELL

OFFSET OPERATORS, UNLEASED MINERAL OWNERS AND LANDOWNERS

WELL NAME: Scott #4-7

<u>LEGAL DESCRIPTION</u>
OPERATORS/UNLEASED MINERAL OWNERS

SE½ SEC. 4-T23S-R31W – Land affected by subject well of this application OPERATOR
PetroSantander (USA) Inc.
6363 Woodway Dr., Ste. 350
Houston, TX 77057

SURFACE and MINERAL OWNERS

Bob and Erva Harrington, Trustees Ronald J. Scott Estate David L. Hargreaves
Harrington Trust 1820 N. Calhoun Ave 325 Main St.

1111 Harding Ave. Liberal, KS 67901 Garden City, KS 67846

NW1/4 SEC. 4-T23S-R31W

Quarter Circle Z CorpTrekell Ranch LLCFrank D. TrekellPO Box 10038PO Box 10038PO Box 10038Casa Grande, AZ 85230Casa Grande, AZ 85230Casa Grande, AZ 85230

Myron J. Carr Testamentary Trust No. One Jeff Whitham, Trustee c/o Western State Bank 1500 East Kansas Avenue Garden City, KS 67846

NE¼ & SW¼ SEC. 4-T23S-R31W; NE¼ Sec. 9-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ SEC. 9 and NE¼ Sec. 9-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ and SW¼ SEC. 3-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ SEC. 10-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form U-1 July 2014 Form must be Typed Form must be Signed All blanks must be Filled

APPLICATION FOR INJECTION WELL

Disposal			Perr	nit Number: E27138			
Enhanced Recovery: Repressuring				API Number: 15-055-20813			
Waterflood			Wei	I Location			
-				-SW-SW-SE Sec. 4	_{Twp.} 23 _{S. R.} 31	□E V W	
February 20, 2010			33		feet from N / V		
Date: February 29, 2019	***************************************			40	feet from V E /	-	
Operator License Number: 32198			_ GPS	Cocation: Lat:	, Long:	.gxxx.xxxxxx)	
Operator: PetroSantander (USA) Inc	.			ım: NAD27 NAD83		.y^^^.	
Address: 6363 Woodway Drive, Ste.			Leas	se Description: SE/4 SECT	ION 4-T23S-R31W		
Houston, TX 77057	Week and the second sec			20 2000/ipii0/iii			
	and a second			se Name: SCOTT	Well Number:	7	
			- Eigh	Name: STEWART	Well Humber:		
		***************************************		nty: FINNEY		Anne Bulene de Marche	
Contact Person: Bill Aspinwall				epest Usable Water			
Phone:				nation:			
Email:			_ Deb	th to Bottom of Formation:			
Injection Formation Description: Name MORROW		top / bottom		perf / open hole	depth t to	feet	
	***************************************	_ /		at	t to	feet	
List of Wells/Facilities Supplying Prod	uced Saltwater	or Other Flu	uids Appro	oved by the Conservation	Division:		
(attach additional sheets if necessary)					W III 0 0		
Lease Operator PETROSANTANDER (USA) IN		Facility Name	RATTE	Lease/Facility Descriptio CO2 RECYCLE	n Well ID & Sp	oot Location	
1. FERROSANTANDER (OSA) IIV		<u>JEITTI TE</u>		002 11201022			
2		******					
3							
Producing Formation	Strata	Depth		Total Dissolv	ved Solids (if available)		
1	to		feet			mg/l	
2	to	· <u></u> ·	feet			mg/l	
						-	
			10 0 1				
	9000	• •		CARBON DIOXIDE			
		scf / day. Type	e of Gas:	**************************************			
Maximum Requested Injection Pressure:	2000	psig					

Well Completion

Type:	✓ Tubing & Packer	Packerless	Tubingless
Type.	Tubing & Lacker	r dononees	

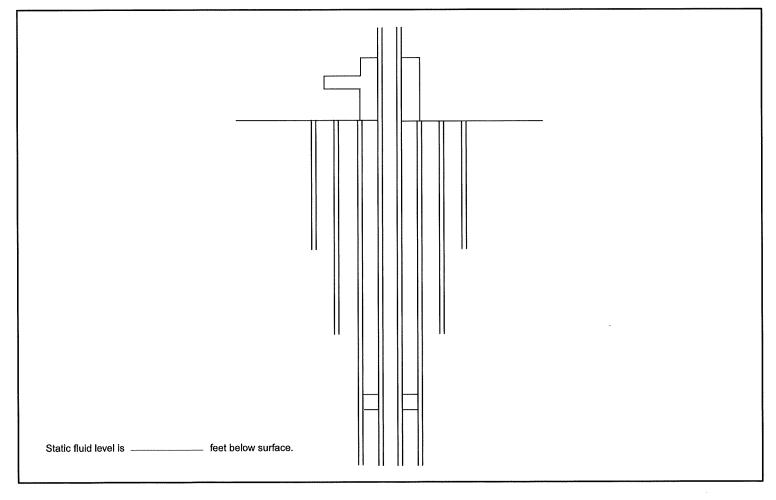
	Conductor	Surface	Intermediate	Production	Tubing
Size	NA	8.625	NA	5.5	2.375
Setting Depth		470		4852	4730
Amount of Cement		275		200	
Top of Cement		0		4150	
Bottom of Cement		470		4852	

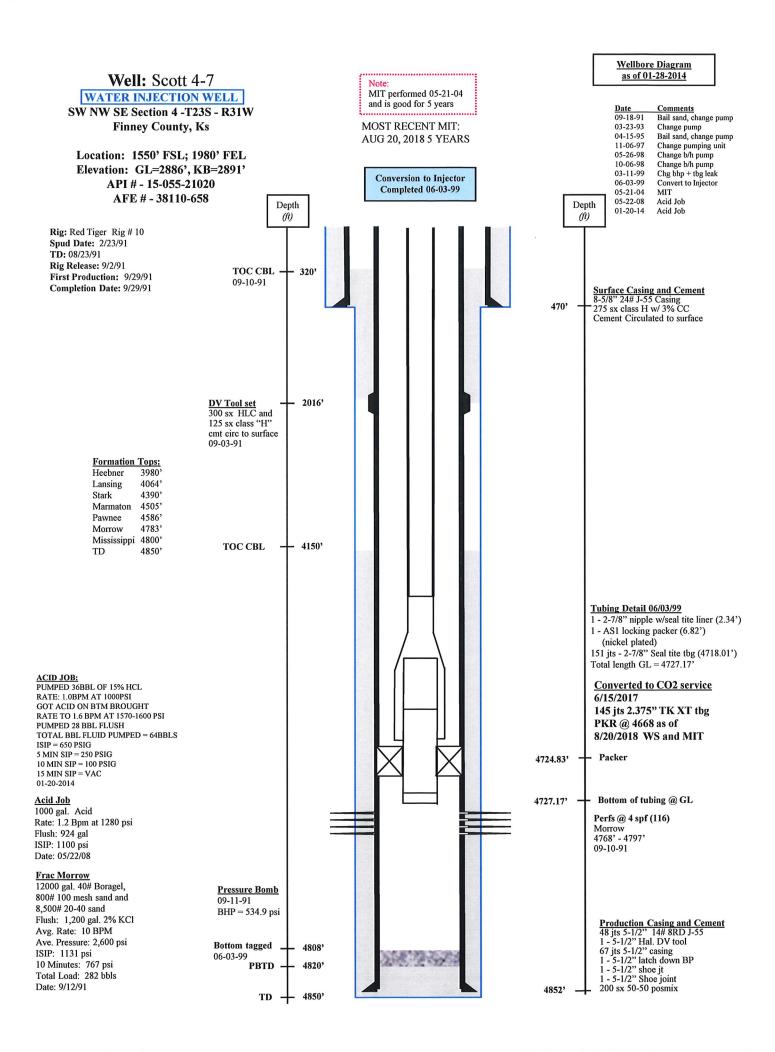
If Alternate II cementing, complete the following:

Perforations / D.V. Tool at 2016 feet, cemented to SURFACE	feet with 425 sx.
Tubing: Type SEALTITE	TK70
Packer: Type ARROWSET 1-X	
Annulus Corrosion Inhibitor: Type	Concentration
List Logs Enclosed: TO FOLLOW VIA EMAIL	
List Logo Environd.	

Well Sketch

(To sketch installation, darken the appropriate lines, indicate cement, and show depths.)





Offset Operators, Unleased Mineral Owners and Landowners acreage

(Attach additional sheets if necessary)	
Name:	Legal Description of Leasehold:
SEE ATTACHED LIST	
	- Augustian Maria Ma
I hereby certify that the statements made herein are true and correct to the best of	my knowledge and helief
Thereby certify that the statements made herein are the and correct to the best of	my knowledge and belief.
Applic	ant or Duly Authorized Agent
Subscribed and sworn befor	e me this,,,,
Noton	Public
Notary	r udilo
My Co	mmission Expires:

Instructions:

- 1. Fully complete application, including page 4 (plat map) showing subject well and all known oil, gas and input wells, including wells being drilled, inactive wells, or dry holes, within one-half mile. Show lease names and operators or unleased mineral rights owners of all lands within one-half mile. Show well numbers and elevations of producing formation tops.
- 2. Attach some type of log (drillers log, electric log, etc.).
- 3. Attach some type of verification of cementing for surface casing, longstring, D.V. tool, perforations, etc. (Cement ticket and job log, bond log, etc.)
- 4. Attach Affidavit of Notice.
- 5. Fill in schematic drawing of subsurface facilities including: size, setting depth, amount of cement, measured or calculated tops of cement for each of surface, intermediate (*if any*) and production casing; size and setting depth of tubing and packer; geological zone of injection showing top and bottom of injection interval.
- 6. The original and one copy of the application and all attachments shall be mailed to the State Corporation Commission, Conservation Division.
- 7. Deliver or mail one (1) copy of the application to the landowner on whose land the injection well is located and to each operator or lessee of record and each unleased mineral rights owner within one-half mile of the applicant well.
- 8. Approval of this application, if granted, is valid only as long as there are no substantial changes in operation set forth in the application. A substantial change requires the approval of a new application. *No injection well may be used without prior written authorization.*
- 9. All application fees must accompany the application.

ATTACHMENT FOR PAGE 3, U-1 APPLICATION FOR INJECTION WELL

OFFSET OPERATORS, UNLEASED MINERAL OWNERS AND LANDOWNERS

WELL NAME: Scott #4-7

<u>LEGAL DESCRIPTION</u>
OPERATORS/UNLEASED MINERAL OWNERS

<u>SE¼ SEC. 4-T23S-R31W</u> – Land affected by subject well of this application <u>OPERATOR</u>
PetroSantander (USA) Inc.
6363 Woodway Dr., Ste. 350
Houston, TX 77057

SURFACE and MINERAL OWNERS
Bob and Erva Harrington, Trustees
Harrington Trust

Harrington Trust 1111 Harding Ave. Garden City, KS 67846 Ronald J. Scott Estate 1820 N. Calhoun Ave Liberal, KS 67901 David L. Hargreaves 325 Main St. Garden City, KS 67846

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Quarter Circle Z Corp PO Box 10038 Casa Grande, AZ 85230 Trekell Ranch LLC PO Box 10038 Casa Grande, AZ 85230 Frank D. Trekell PO Box 10038 Casa Grande, AZ 85230

Myron J. Carr Testamentary Trust No. One Jeff Whitham, Trustee c/o Western State Bank 1500 East Kansas Avenue Garden City, KS 67846

NE¼ & SW¼ SEC. 4-T23S-R31W; NE¼ Sec. 9-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ SEC. 9 and NE¼ Sec. 9-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ and SW¼ SEC. 3-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

NW¼ SEC. 10-T23S-R31W PetroSantander (USA) Inc. 6363 Woodway Dr., Ste. 350 Houston, TX 77057

July 2014 Plat and Certificate of Injection Well Location and Surrounding Acreages Location of Well: SE/4 SECTION 4-23S-31W (SEE ATTACHED PLAT) $_{Operator:}$ PETROSANTANDER (USA) INC. Lease: SCOTT 1550 _____ feet from N / V S Line of Section Well Number: 4-7 1980 _____ feet from 🗸 E / 🗌 W Line of Section County: FINNEY ____ s. R. 31 Plat Show the following information: applicant injection well, all producing wells, inactive wells, plugged wells, and other wells within a one-half mile radius, all lease boundaries, lease operators, unleased mineral rights owners, well numbers, and producing wells producing formation tops. applicant well 🛕 producing well plugged injection well D&A well other injection well temporary abandoned well plugged producer water supply well __ , and that all of the information The undersigned hereby certifies that he / she is a duly authorized agent for shown herein is true, complete and correct to the best of his / her knowledge. Applicant or Duly Authorized Agent Subscribed and sworn before me this _____ day of

Notary Public

My Commission Expires: __

PLAT AND CERTIFICATE OF WELL LOCATION AND SURROUNDING ACREAGES

Operator: PetroSantander (USA) Inc.
Lease: Stewart (Morrow) Unit
Well#: Scott #4-7 feet from the East section line Section 4, T23S R31W County: Finney TVC 4-1 PETROSANTANDER (USA) INC. SHERMAN TRUST #1 GAS: (SOMERS UNIT) CHESAPEAKE OPERATING on, et al PETROSANTANDER (U "HARRINGTON-SCOTT SHERMAN 3-4 ≀R" 1/2 - MILE RADIUS HARRINGTON-SCOTT 4 ∕4-6 SWD ER (USA) INC 5-6 PETROSANTANDER (USA) INC. PETROSANTANDER (USA) INC. A SCOTT 4-8 ROPOSED INJECTOR A-5 PETROSANTANDER (USA) INC. - STE <u></u>3-8 BECKER 5-1 T23S - R31W SCOTT 4-3 N BRUCE SMITH **△**4-2 INJ PETROSANTANDER (USA) INC. ROSANTANDER "SCOTT SHERMAN FARMS ₿ PROPOSED INJECTION WELL 9-1 📤 10-2 IN. MERRILL #1 Pauls 9-3 Ø. 10-3 9-6 LARSON OPERATING CO. PETROSANTANDER (USA) INC. PAULS 7-9 STEWART UNIT STEWART UNIT PAULS-ALLEY #1 Æ, "MEYER NW1/4 LEASE" PETROSANTANDER (USA) INC. The undersigned hereby certifies that he is a duly authorized agent for <u>PetroSantander (USA) Inc.</u> and that all of the information shown herein is true, complete and correct to the best of his knowledge. William F. Aspinwall, Land Manager Signature of Duly Authorized Agent

Notary Public

Subscribed and sworn to before me this _____ day of _

My commission expires:

Affidavit of Notice Served

Re:	Application for:		
	Well Name:	Legal Location:	
The und	ersigned hereby certificates that he / she is a duly authorized agent	t for the applicant, and that on the day of	
	, a true and correct copy of the application referenced	above was delivered or mailed to the following parties:	
Note: A	copy of this affidavit must be served as a part of the application.		
	Name	Address (Attach additional sheets if necessary)	
l further	attest that notice of the filing of this application was published in the	e	. the official county publication
	didd: that holde of the hing of the application has passive at the		, ·
Signed t	this day of,,		
		Applicant or Duly Authorized Agent	
	Subscribed and sworn t	o before me this day of	
		Notary Public	W
	,	My Commission Expires:	

Protests may be filed by any party having a valid interest in the application. Petitions for protests shall be in writing and shall clearly identify the name and address of the protestant and the title of the application. The petition shall include a clear and concise statement of the direct and substantial interest of the protestant in the proceedings, including the manner in which the protestant may be affected, and the nature, extent, character and grounds of the protest. Protestants shall serve the protest upon the applicant by mail or personal service at the same time or before the protestant files the protest with the Conservation Division. Protests must be filed within 30 days of the publication notice of the application.