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 # 8490
Name: Keen, Dwight D. & Lenore M. dba Keen Oil Co
Address 1: # 1 TAM O SHANTER CT
Address 2:
City: WINFIELD State: KS Zip: 67156 + 6309
Contact Person: Lenore M Keen
Phone: (620) 221-6267
Lease Name: RIDGWAY
Well Number: 8

API No.: 15-019-24308-00-01
Permit No: E18248.12
Reporting Year: 2019
(January 1 to December 31)

SW - NE - SW - NW Sec. 20 Twp. 33 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3321 feet from ☐ N / ☑ S Line of Section
4277 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: 500 psi Injection Zone: PERU
Maximum Authorized Injection Rate: 500 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	510	230			26
February	460	240			22
March	485	230			24
April	530	230			21
May	510	240			25
June	480	240			26
July	460	230			23
August	490	230			20
September	530	230			21
October	545	240			26
November	520	240			27
December	500	230			25
TOTAL	6020		0		

Submitted Electronically