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 # 35427
Name: Specht, Brian L.
Address 1: 1569 XYLAN RD
Address 2:
City: PIQUA State: KS Zip: 66761 + 1621
Contact Person: Brian
Phone: (620) 363-1834
Lease Name: KESSINGER
Well Number: RW 9

API No.: 15-001-25550-00-01
Permit No: E26588.1
Reporting Year: 2019
(January 1 to December 31)

____ - NE - NE - SE Sec. 8 Twp. 24 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
2348 feet from ☐ N / ☑ S Line of Section
12 feet from ☑ E / ☐ W Line of Section
County: Allen

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: Bartlesville
Maximum Authorized Injection Rate: 30 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	0				
February	0				
March	0				
April	0				
May	0				
June	0				
July	0				
August	100	0			20
September	100	0			20
October	0				
November	0				
December	0				
TOTAL	200		0		

Submitted Electronically