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 # 30233
Name: Red Hills Resources, Inc.
Address 1: PO BOX 132
Address 2:
City: ENGLEWOOD State: KS Zip: 67840 + 0132
Contact Person: James McKinney
Phone: (620) 539-2000
Lease Name: RANDALL
Well Number: 2

API No.: 15-025-10078-00-01
Permit No: D23449.0
Reporting Year: 2019
(January 1 to December 31)

____ - SE - SE - SE Sec. 36 Twp. 34 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
315 feet from ☐ N / ☑ S Line of Section
626 feet from ☑ E / ☐ W Line of Section
County: Clark

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: 600 psi Injection Zone: Ninnesc
Maximum Authorized Injection Rate: 120 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		0	0	0
February	0		0	0	0
March	0		0	0	0
April	0		0	0	0
May	0		0	0	0
June	0		0	0	0
July	0		0	0	0
August	0		0	0	0
September	0		0	0	0
October	0		0	0	0
November	0		0	0	0
December	0		0	0	0
TOTAL	0		0		

Submitted Electronically