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 # 4313
Name: Walker Tank Service, Inc
Address 1: 128 N. Garfield Ave.
Address 2: PO BOX 117
City: UTICA State: KS Zip: 67584 + 0117
Contact Person: Galen Walker
Phone: (785) 391-2408
Lease Name: FRANK
Well Number: 1A-20-1831

API No.: 15-171-20842-00-01
Permit No: D32325.0
Reporting Year: 2019
(January 1 to December 31)

W2 - NE - NE - NE Sec. 20 Twp. 18 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☑ N / ☐ S Line of Section
495 feet from ☑ E / ☐ W Line of Section
County: Scott

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: _____ psi Injection Zone: cedar hills
Maximum Authorized Injection Rate: _____ 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	7252	0	0	0	31
February	7571	0	0	0	28
March	9250	0	0	0	31
April	9878	0	0	0	30
May	9455	0	0	0	31
June	7667	0	0	0	30
July	9046	0	0	0	31
August	10006	0	0	0	31
September	10395	0	0	0	30
October	10477	0	0	0	31
November	12208	0	0	0	30
December	11695	0	0	0	31
TOTAL	114900		0		

Submitted Electronically