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 # 33982
Name: Alton Oil LLC
Address 1: 14081 121st Road
Address 2: P.O. Box 117
City: WINFIELD State: KS Zip: 67156 + 0117
Contact Person: Michael A. Pressnall
Phone: ( 620 ) 221-4268
Lease Name: DONALD
Well Number: 2 SWD

API No.: 15-035-22938-00-01
Permit No: D31592.0
Reporting Year: 2019
*(January 1 to December 31)*

SE - SE - SE - SE Sec. 29 Twp. 30 S. R. 5 ☑ E ☐ W
*(Q/Q/Q/Q)*
250 feet from ☐ N / ☑ S Line of Section
200 feet from ☑ E / ☐ W Line of Section
County: Cowley

**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: 250 psi Injection Zone: STALNAKER
Maximum Authorized Injection Rate: 1500 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 | 2750 | 0 | | | 31 |
| February | 2600 | 0 | | | 28 |
| March | 2700 | 0 | | | 31 |
| April | 2750 | 0 | | | 30 |
| May | 2800 | 0 | | | 31 |
| June | 2675 | 0 | | | 30 |
| July | 2725 | 0 | | | 31 |
| August | 2800 | 0 | | | 31 |
| September | 2750 | 0 | | | 30 |
| October | 2850 | 0 | | | 31 |
| November | 2675 | 0 | | | 30 |
| December | 2750 | 0 | | | 31 |
| ***TOTAL*** | 32825 | | 0 | | |

Submitted Electronically