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 # 6227
Name: Kraft Oil Company LLC
Address 1: 434 IRIS RD SW
Address 2:
City: GRIDLEY State: KS Zip: 66852 + 9253
Contact Person: Thomas A. Kraft
Phone: (620) 836-2091
Lease Name: WEIDE (SOUTH)
Well Number: W I 2

API No.: 15-207-02188-00-00
Permit No: E13070.1
Reporting Year: 2019
(January 1 to December 31)

____ - NW - NE - NW Sec. 6 Twp. 24 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
5124 feet from ☐ N / ☑ S Line of Section
3759 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 200 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	3500	250			31
February	3000	250			28
March	3500	250			31
April	3300	250			30
May	3500	250			31
June	3300	250			30
July	3500	250			31
August	3500	250			31
September	3300	250			30
October	3500	250			31
November	3300	250			30
December	3500	250			31
TOTAL	40700		0		

Submitted Electronically