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 # 4184
Name: Chris Batchman Inc.
Address 1: 244 SE 120 AVE
Address 2:
City: ELLINWOOD State: KS Zip: 67526 + 9200
Contact Person: Chris Batchman
Phone: (620) 566-7111
Lease Name: SESSLER CHARLES
Well Number: 4-A (SWD)

API No.: 15-009-24019-00-00
Permit No: D24167.0
Reporting Year: 2019
(January 1 to December 31)

____ - N2 - N2 - SW Sec. 24 Twp. 20 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
2428 feet from ☐ N / ☑ S Line of Section
4060 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 7500 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	131750				31
February	119000				28
March	131500				31
April	127500				30
May	131750				31
June	127500				30
July	131750				31
August	131750				31
September	127500				30
October	131750				31
November	127500				30
December	131750				31
TOTAL	1551000		0		

Submitted Electronically