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: LARRY
Well Number: 2

API No.: 15-009-25865-00-01
Permit No: D31703.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SE - NW Sec. 18 Twp. 20 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
3033 feet from ☐ N / ☑ S Line of Section
3671 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: 5000 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	37200				31
February	33600				28
March	37200				31
April	36000				30
May	37200				31
June	36000				30
July	37200				31
August	37200				31
September	36000				30
October	37200				31
November	36000				30
December	37200				31
TOTAL	438000		0		

Submitted Electronically