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 # 31528
Name: Mike Kelso Oil, Inc.
Address 1: PO BOX 467
Address 2:
City: CHASE State: KS Zip: 67524 + 0467
Contact Person: Matt Burton
Phone: (620) 938-2943
Lease Name: WIGGINS
Well Number: 1

API No.: 15-159-21200-00-01
Permit No: D25472.0
Reporting Year: 2019
(January 1 to December 31)

____ - SE - SW - SW Sec. 10 Twp. 19 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
310 feet from ☐ N / ☑ S Line of Section
4392 feet from ☑ E / ☐ W Line of Section
County: Rice

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: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 1000 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	21700	0	0	0	31
February	19600	0	0	0	28
March	21700	0	0	0	31
April	21000	0	0	0	30
May	21700	0	0	0	31
June	21000	0	0	0	30
July	21700	0	0	0	31
August	21700	0	0	0	31
September	21000	0	0	0	30
October	21700	0	0	0	31
November	21000	0	0	0	30
December	21700	0	0	0	31
TOTAL	255500		0		

Submitted Electronically