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 # 5046
Name: Raymond Oil Company, Inc.
Address 1: PO BOX 48788
Address 2:
City: WICHITA State: KS Zip: 67201 + 8788
Contact Person: Charles Roach
Phone: (316) 267-4214
Lease Name: GRIZZELL
Well Number: 2

API No.: 15-151-21011-00-01
Permit No: D20499.0
Reporting Year: 2019
(January 1 to December 31)

____ - SE - NW - SW Sec. 3 Twp. 26 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
1672 feet from ☐ N / ☑ S Line of Section
4346 feet from ☑ E / ☐ W Line of Section
County: Pratt

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: 300 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	1550	0	0		31
February	1050	0	0		21
March	725	0	0		25
April	528	0	0		22
May	1148	0	0		14
June	2262	0	0		29
July	2340	0	0		30
August	2184	0	0		28
September	1700	0	0		25
October	1632	0	0		24
November	1768	0	0		26
December	1827	0	0		29
TOTAL	18714		0		

Submitted Electronically