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: HINEMAN-LAYNE UNIT
Well Number: 1

API No.: 15-101-22569-00-00
Permit No: D32298.0
Reporting Year: 2019
(January 1 to December 31)

NE - SE - NE - NW Sec. 9 Twp. 19 S. R. 27 ☐ E ☑ W
(Q/Q/Q/Q)
725 feet from ☑ N / ☐ S Line of Section
2520 feet from ☐ E / ☑ W Line of Section
County: Lane

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: CEDAR HILLS
Maximum Authorized Injection Rate: 1500 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	1578	0	0		31
February	1439	0	0		28
March	1611	0	0		31
April	1568	0	0		30
May	1566	0	0		30
June	1510	0	0		29
July	1576	0	0		30
August	1579	0	0		30
September	1528	0	0		29
October	1560	0	0		30
November	1533	0	0		29
December	1637	0	0		30
TOTAL	18685		0		

Submitted Electronically