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 # 30606
Name: Murfin Drilling Co., Inc.
Address 1: 250 N WATER STE 300
Address 2:
City: WICHITA State: KS Zip: 67202 + 1216
Contact Person: Michelle Howell
Phone: (316) 267-3241
Lease Name: STITES
Well Number: 1-31

API No.: 15-039-20920-00-00
Permit No: D27953.0
Reporting Year: 2019
(January 1 to December 31)

SE - NW - NE - ____ Sec. 31 Twp. 2 S. R. 26 ☐ E ☑ W
(Q/Q/Q/Q)
4134 feet from ☐ N / ☑ S Line of Section
1755 feet from ☑ E / ☐ W Line of Section
County: Decatur

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: 500 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	1762	0	0	0	31
February	2075	0	0	0	28
March	2284	0	0	0	31
April	2506	0	0	0	30
May	2717	0	0	0	31
June	2462	0	0	0	30
July	2959	0	0	0	31
August	2795	0	0	0	31
September	1812	0	0	0	30
October	2040	0	0	0	31
November	2930	0	0	0	30
December	3461	0	0	0	31
TOTAL	29803		0		

Submitted Electronically