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 # 34483
Name: L & P Enterprises, LLC
Address 1: 29975 INDIANAPOLIS RD
Address 2:
City: PAOLA State: KS Zip: 66071 + 4791
Contact Person: Lesli Baker
Phone: (913) 238-0404
Lease Name: HEELER (STRALEY)
Well Number: A-5

API No.: 15-121-22873-00-01
Permit No: E32376.2
Reporting Year: 2019
(January 1 to December 31)

SE - NW - NE - NW Sec. 8 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4650 feet from ☐ N / ☑ S Line of Section
3333 feet from ☑ E / ☐ W Line of Section
County: Miami

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 100 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	30	300	0	0	31
February	27	300	0	0	28
March	31	300	0	0	31
April	30	300	0	0	30
May	28	300	0	0	31
June	29	300	0	0	30
July	30	300	0	0	31
August	30	300	0	0	31
September	28	300	0	0	30
October	28	300	0	0	31
November	26	300	0	0	30
December	29	300	0	0	31
TOTAL	346		0		

Submitted Electronically