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 # 33861
Name: Allen's Service Inc. dba Rude Crude
Address 1: PO BOX 145
Address 2:
City: HAMILTON State: KS Zip: 66853 + 0145
Contact Person: Brett Dannels
Phone: (620) 344-3406
Lease Name: SCHLOTTERBECK
Well Number: A-3

API No.: 15-073-23042-00-01
Permit No: E31970.1
Reporting Year: 2019
(January 1 to December 31)

____ - ____ - ____ - NW Sec. 10 Twp. 24 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3538 feet from ☐ N / ☑ S Line of Section
4980 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 600 psi Injection Zone: Mississippi
Maximum Authorized Injection Rate: 200 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	1400	0	0		28
March	1550	0	0		31
April	1500	0	0		30
May	1550	0	0		31
June	1500	0	0		30
July	1550	0	0		31
August	1550	0	0		31
September	1500	0	0		30
October	1550	0	0		31
November	1500	0	0		30
December	1550	0	0		31
TOTAL	18250		0		

Submitted Electronically