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 # 33996
Name: V. Francis Weigel Family Partnership LLC
Address 1: PO BOX 219
Address 2:
City: GORHAM State: KS Zip: 67640 + 0219
Contact Person: Cecil F. Weigel
Phone: (785) 637-5383
Lease Name: SHAFFER
Well Number: 3

API No.: 15-167-02080-00-01
Permit No: D24026.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NW - NE Sec. 20 Twp. 13 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
4201 feet from ☐ N / ☑ S Line of Section
2093 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 350 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	2485	0	0		31
February	2285	0	0		28
March	2450	0	0		31
April	2358	0	0		30
May	2385	0	0		31
June	2365	0	0		30
July	2450	0	0		31
August	2475	0	0		31
September	2345	0	0		30
October	2355	0	0		31
November	2465	0	0		30
December	2495	0	0		31
TOTAL	28913		0		

Submitted Electronically