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 # 33948
Name: C & J Production LLC
Address 1: 4 FAIRWAY DR
Address 2:
City: MARION State: KS Zip: 66861 + 1173
Contact Person: Michael Sigel
Phone: ( 620 ) 382-4084
Lease Name: RIECHERT
Well Number: 1

API No.: 15-113-20489-00-01
Permit No: D25135.0
Reporting Year: 2019
*(January 1 to December 31)*

____ - NE - NW - NE Sec. 14 Twp. 20 S. R. 3 ☐ E ☑ W
*(Q/Q/Q/Q)*
4972 feet from ☐ N / ☑ S Line of Section
1644 feet from ☑ E / ☐ W Line of Section
County: McPherson

**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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 5000 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 | 6007 | 0 | 0 | | 31 |
| February | 5591 | 0 | 0 | | 28 |
| March | 6006 | 0 | 0 | | 31 |
| April | 5815 | 0 | 0 | | 30 |
| May | 6003 | 0 | 0 | | 31 |
| June | 5809 | 0 | 0 | | 30 |
| July | 6012 | 0 | 0 | | 31 |
| August | 6014 | 0 | 0 | | 31 |
| September | 5808 | 0 | 0 | | 30 |
| October | 6005 | 0 | 0 | | 31 |
| November | 5808 | 0 | 0 | | 30 |
| December | 6006 | 0 | 0 | | 31 |
| ***TOTAL*** | 70884 | | 0 | | |

Submitted Electronically