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 # 35653
Name: Own Resources Operating LLC
Address 1: 36695 HWY 385
Address 2: PO BOX 250
City: WRAY State: CO Zip: 80758 + 0250
Contact Person: Pat Dolezal
Phone: (970) 332-3585
Lease Name: RRI SWD
Well Number: 21-11

API No.: 15-023-21235-00-01
Permit No: D30733.0
Reporting Year: 2019
(January 1 to December 31)

NW - NE - NE - NW Sec. 11 Twp. 3 S. R. 42 ☐ E ☑ W
(Q/Q/Q/Q)
5089 feet from ☐ N / ☑ S Line of Section
3123 feet from ☑ E / ☐ W Line of Section
County: Cheyenne

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: CEDAR HILLS
Maximum Authorized Injection Rate: 2000 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	8866	35	0		11
February	6895	35	0		8
March	5579	35	0		11
April	5070	35	0		10
May	6195	35	0		11
June	5939	35	0		10
July	4138	35	0		11
August	4852	35	0		11
September	4250	35	0		10
October	3673	35	0		11
November	2966	35	0		10
December	3939	35	0		11
TOTAL	62362		0		

Submitted Electronically