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 # 6109
Name: C. F. Oil, a General Partnership
Address 1: 40 R ST
Address 2:
City: LAKE LOTAWANA State: MO Zip: 64086 + 9429
Contact Person: j frazier
Phone: (816) 578-4308
Lease Name: ROSEBERRY-PECK
Well Number: WW 1

API No.: 15-121-25508-00-00
Permit No: E22128.1
Reporting Year: 2019
(January 1 to December 31)

NW - SE - NW - NW Sec. 12 Twp. 18 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4374 feet from ☐ N / ☑ S Line of Section
4680 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: _____ mg/l Specific Gravity: _____ Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 600 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 300 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	0	0	0		0
February	0	0	0		0
March	0	0	0		0
April	0	0	0		0
May	0	0	0		0
June	0	0	0		0
July	0	0	0		0
August	0	0	0		0
September	0	0	0		0
October	0	0	0		0
November	0	0	0		0
December	0	0	0		0
TOTAL	0		0		

Submitted Electronically