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 # 31428
Name: Crawford, Jeff dba Lonestar Oil Co
Address 1: PO BOX 205
Address 2:
City: GORHAM State: KS Zip: 67640 + 0205
Contact Person: Jeff Crawford
Phone: (785) 735-4585
Lease Name: JOHNSON
Well Number: 2

API No.: 15-167-21432-00-01
Permit No: D20393.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SW - SW Sec. 35 Twp. 13 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
1050 feet from ☐ N / ☑ S Line of Section
4984 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: GRANIT WASH
Maximum Authorized Injection Rate: 750 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	15810	0	0	0	31
February	14280	0	0		28
March	16430	0	0	0	31
April	17103	0	0	0	30
May	17210	0	0	0	31
June	16940	0	0	0	30
July	17360	0	0	0	31
August	17480	0	0	0	31
September	16970	0	0	0	30
October	17680	0	0	0	31
November	17740	0	0	0	30
December	17810	0	0	0	31
TOTAL	202813		0		

Submitted Electronically