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 # 30624
Name: Meyer, Theodore J.
Address 1: 761 N CHICASKIA RD
Address 2:
City: CONWAY SPRINGS State: KS Zip: 67031 + 8012
Contact Person: Ted Meyer
Phone: (620) 456-2955
Lease Name: TEAGUE-BROONER
Well Number: 1-9

API No.: 15-191-00542-00-02
Permit No: D28135.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SW - NW Sec. 9 Twp. 31 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
2970 feet from ☐ N / ☑ S Line of Section
4950 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: ARBUCKLE
Maximum Authorized Injection Rate: 1000 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	3840	0	0		31
February	4200	0	0		28
March	5000	0	0		31
April	4910	0	0		30
May	5200	0	0		31
June	5120	0	0		30
July	5220	0	0		31
August	5100	0	0		31
September	4800	0	0		30
October	4700	0	0		31
November	4400	0	0		30
December	4910	0	0		31
TOTAL	57400		0		

Submitted Electronically