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 # 32864
Name: XTO Energy Inc.
Address 1: 210 PARK AVE STE 2350
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73102 + 5683
Contact Person: Vicki Dickenson
Phone: (405) 594-9465
Lease Name: KANSAS B SWD
Well Number: 1

API No.: 15-055-21562-00-00
Permit No: D27417.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SE - SW Sec. 26 Twp. 24 S. R. 33 ☐ E ☑ W
(Q/Q/Q/Q)
1280 feet from ☐ N / ☑ S Line of Section
3663 feet from ☑ E / ☐ W Line of Section
County: Finney

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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	223	0			31
February	107	0			28
March	126	0			31
April	268	0			30
May	0	0			31
June	299	0			30
July	131	0			31
August	270	0			31
September	132	0			30
October	210	0			31
November	0	0			30
December	130	0			31
TOTAL	1896		0		

Submitted Electronically