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 # 33816
Name: Curry, Gregg
Address 1: 1986 310TH ST
Address 2:
City: MADISON State: KS Zip: 66860 + 8023
Contact Person: GREGG CURRY
Phone: (620) 437-2526
Lease Name: KIPFER
Well Number: E-1

API No.: 15-073-19534-00-01
Permit No: E25521.1
Reporting Year: 2019
(January 1 to December 31)

____ - SE - SE - SW Sec. 1 Twp. 22 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
2970 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 400 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 200 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	3000	150			31
February	3000	150			28
March	3000	150			31
April	3000	150			30
May	3000	150			31
June	3000	150			30
July	3000	150			31
August	3000	150			31
September	3000	150			30
October	3000	150			31
November	3000	150			30
December	3000	150			31
TOTAL	36000		0		

Submitted Electronically