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 # 35457
Name: Reata Petroleum LLC
Address 1: PO BOX 111
Address 2:
City: INDEPENDENCE State: KS Zip: 67301 + 0111
Contact Person: Kyler Finney
Phone: (918) 440-8878
Lease Name: OAKRIDGE
Well Number: 6

API No.: 15-019-19018-00-01
Permit No: E27749.1
Reporting Year: 2019
(January 1 to December 31)

SW - SW - NW - NE Sec. 14 Twp. 33 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3979 feet from ☐ N / ☑ S Line of Section
2390 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: No
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 800 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	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	40	10	0	0	8
TOTAL	40		0		

Submitted Electronically