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 # 3334
Name: Robl-Six, Inc.
Address 1: 109 W 10TH ST
Address 2:
City: ELLINWOOD State: KS Zip: 67526 + 1119
Contact Person: Andy Wise
Phone: (620) 617-3315
Lease Name: HAMMEKE
Well Number: 2

API No.: 15-009-26065-00-00
Permit No: D32127.0
Reporting Year: 2019
(January 1 to December 31)

NW - SW - NW - SE Sec. 13 Twp. 19 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
1766 feet from ☐ N / ☑ S Line of Section
2617 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 7000 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	11222	0	0		31
February	9268	0	0		28
March	9322	0	0		31
April	9828	0	0		30
May	11098	0	0		31
June	9984	0	0		30
July	10846	0	0		31
August	11098	0	0		31
September	10740	0	0		30
October	11098	0	0		31
November	10344	0	0		30
December	9572	0	0		31
TOTAL	124420		0		

Submitted Electronically