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 # 31613
Name: Sheedy, Charles W. dba Sheedy Energy Production Company
Address 1: 709 E KANSAS
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 1349
Contact Person: Charles Sheedy
Phone: (620) 625-3440
Lease Name: FULHAGE RUTH ANNA
Well Number: 11

API No.: 15-207-22784-00-01
Permit No: D26770.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SW - NW Sec. 27 Twp. 25 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
2880 feet from ☐ N / ☑ S Line of Section
4980 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 100 psi Injection Zone: KANSAS CITY
Maximum Authorized Injection Rate: 50 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
February	5		0		03
March	6		0		3
April	8		0		4
May	6		0		4
June	5		0		4
July	6		0		4
August	8		0		5
September	5		0		4
October	9		0		5
November	0		0		0
December	0		0		0
TOTAL	58		0		

Submitted Electronically