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 # 33905
Name: Royal Drilling Inc
Address 1: 2319 E. US HIGHWAY 40
Address 2: PO BOX 342
City: RUSSELL State: KS Zip: 67665 + 0342
Contact Person: JOHN DRISCOLL
Phone: (785) 483-6446
Lease Name: DEYOUNG
Well Number: 2

API No.: 15-065-22150-00-03
Permit No: D32820.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SE - NE Sec. 35 Twp. 9 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
3628 feet from ☐ N / ☑ S Line of Section
1118 feet from ☑ E / ☐ W Line of Section
County: Graham

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: _____ *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0				
February	0				
March	0				
April	0				
May	0				
June	0				
July	2000				10
August	6200				31
September	5900				30
October	6000				31
November	5500				30
December	6100				31
TOTAL	31700		0		

Submitted Electronically