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 # 30717
Name: Downing-Nelson Oil Co Inc
Address 1: PO BOX 1019
Address 2:
City: HAYS State: KS Zip: 67601 + 1019
Contact Person: Michele Meier
Phone: (785) 621-2610
Lease Name: LOYD
Well Number: 1-26

API No.: 15-065-23662-00-01
Permit No: E31583.1
Reporting Year: 2019
(January 1 to December 31)

S2 - NW - NE - NW Sec. 26 Twp. 9 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
335 feet from ☑ N / ☐ S Line of Section
1650 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: 0 mg/l Specific Gravity: 0 Additives: None
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1000 psi Injection Zone: LKC
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	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	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically