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 # 4706
Name: Messenger Petroleum, Inc.
Address 1: 525 S MAIN ST
Address 2:
City: KINGMAN State: KS Zip: 67068 + 1968
Contact Person: Jon F. Mesenger
Phone: (620) 532-5400
Lease Name: LINDQUIST
Well Number: 1

API No.: 15-095-01012-00-01
Permit No: D26047.0
Reporting Year: 2019
(January 1 to December 31)

____ - ____ - NW - SE Sec. 24 Twp. 28 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
1980 feet from ☐ N / ☑ S Line of Section
2080 feet from ☑ E / ☐ W Line of Section
County: Kingman

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: 5040 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	2220	-5			31
February	2234	-5			28
March	2660	-5			31
April	2280	-5			30
May	1705	-5			31
June	2100	-5			30
July	1930	-5			31
August	2340	-5			31
September	2850	-5			30
October	2640	-5			31
November	2400	-5			30
December	2490	-5			31
TOTAL	27849		0		

Submitted Electronically