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 # 5098
Name: Shelley, Randall D.
Address 1: 212 N. MARKET ST. SUITE 402
Address 2:
City: WICHITA State: KS Zip: 67202 + 2017
Contact Person: Randall Shelley
Phone: ( 316 ) 841-4747
Lease Name: BIEBERLE
Well Number: 2

API No.: 15-009-05950-00-01
Permit No: D03927.0
Reporting Year: 2019
*(January 1 to December 31)*

____ - SE - NW - NW Sec. 4 Twp. 19 S. R. 11 ☐ E ☑ W
*(Q/Q/Q/Q)*
4426 feet from ☐ N / ☑ S Line of Section
4378 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: 50 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 7700 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 | 15810 | 0 | 0 | | 31 |
| February | 14280 | 0 | 0 | | 28 |
| March | 15810 | 0 | 0 | | 31 |
| April | 15300 | 0 | 0 | | 30 |
| May | 15810 | 0 | 0 | | 31 |
| June | 15300 | 0 | 0 | | 30 |
| July | 15810 | 0 | 0 | | 31 |
| August | 15810 | 0 | 0 | | 31 |
| September | 15300 | 0 | 0 | | 30 |
| October | 15810 | 0 | 0 | | 31 |
| November | 15300 | 0 | 0 | | 30 |
| December | 15810 | 0 | 0 | | 31 |
| ***TOTAL*** | 186150 | | 0 | | |

Submitted Electronically