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 # 5252
Name: R. P. Nixon Operations, Inc
Address 1: 207 W 12TH
Address 2:
City: HAYS State: KS Zip: 67601 + 3810
Contact Person: Dan Nixon
Phone: (785) 628-3834
Lease Name: SCHRANDT
Well Number: 3

API No.: 15-163-19396-00-01
Permit No: D02869.0
Reporting Year: 2019
(January 1 to December 31)

NE - NW - NE - NW Sec. 4 Twp. 10 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
5007 feet from ☐ N / ☑ S Line of Section
3598 feet from ☑ E / ☐ W Line of Section
County: Rooks

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: Unknown mg/l Specific Gravity: Unknown Additives: No
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Cedar Hill
Maximum Authorized Injection Rate: 600 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	7000	0	0	0	31
February	6320	0	0	0	28
March	7000	0	0	0	31
April	6760	0	0	0	30
May	7000	0	0	0	31
June	6762	0	0	0	30
July	7000	0	0	0	31
August	7000	0	0	0	31
September	6760	0	0	0	30
October	7000	0	0	0	31
November	6762	0	0	0	30
December	7000	0	0	0	31
TOTAL	82364		0		

Submitted Electronically