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 # 35229
Name: West Place Crude, LLC
Address 1: 23062 FARLIN RD
Address 2:
City: PARKER State: KS Zip: 66072 + 6013
Contact Person: Todd Wollard
Phone: (913) 481-2601
Lease Name: WOLLARD-ABBOTT
Well Number: 61 W

API No.: 15-107-21794-00-01
Permit No: E26341.1
Reporting Year: 2019
(January 1 to December 31)

____ - NW - NE - SE Sec. 28 Twp. 19 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1990 feet from ☐ N / ☑ S Line of Section
670 feet from ☑ E / ☐ W Line of Section
County: Linn

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: 400 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 100 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					
February					
March					
April	50	400			30
May	50	400			31
June	50	400			30
July	50	400			31
August	50	400			31
September	50	400			30
October	50	400			31
November					
December					
TOTAL	350		0		

Submitted Electronically