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 # 8038
Name: Alexander, Gary M.
Address 1: RR 1 359 RD 25
Address 2:
City: PERU State: KS Zip: 67360 + 9011
Contact Person: Gary Alexander
Phone: (620) 725-5784
Lease Name: ALEXANDER
Well Number: 3

API No.: 15-019-25131-00-00
Permit No: D24246.0
Reporting Year: 2019
(January 1 to December 31)

NE - SE - SW - NE Sec. 4 Twp. 35 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3260 feet from ☐ N / ☑ S Line of Section
1550 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 300 psi Injection Zone: LAYTON
Maximum Authorized Injection Rate: 60 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	290	0			29
February	280	0			28
March	300	0			30
April	300	0			30
May	310	0			31
June	300	0			30
July	310	0			31
August	300	0			30
September	280	0			28
October	300	0			30
November	300	0			30
December	290	0			29
TOTAL	3560		0		

Submitted Electronically