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 # 8490
Name: Keen, Dwight D. & Lenore M. dba Keen Oil Co
Address 1: # 1 TAM O SHANTER CT
Address 2:
City: WINFIELD State: KS Zip: 67156 + 6309
Contact Person: Lenore M Keen
Phone: (620) 221-6267
Lease Name: RIDGWAY
Well Number: 10

API No.: 15-019-25390-00-01
Permit No: E18248.15
Reporting Year: 2020
(January 1 to December 31)

NE - NW - SE - NW Sec. 20 Twp. 33 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
3682 feet from ☐ N / ☑ S Line of Section
3550 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: 500 psi Injection Zone: PERU
Maximum Authorized Injection Rate: 500 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	235	240			18
February	230	240			23
March	240	240			20
April	250	250			19
May	245	255			24
June	255	230			26
July	245	235			23
August	240	230			22
September	245	245			26
October	250	235			21
November	265	240			27
December	255	250			25
TOTAL	2955		0		

Submitted Electronically