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 # 34434
Name: Edison Operating Company LLC
Address 1: 8100 E. 22ND ST. N., BLDG 1900
Address 2:
City: WICHITA State: KS Zip: 67226 + 2319
Contact Person: David Withrow
Phone: (316) 201-1744
Lease Name: N K
Well Number: 44-17

API No.: 15-175-20722-00-01
Permit No: D25049.0
Reporting Year: 2020
(January 1 to December 31)

SE - SE - ____ - ____ Sec. 17 Twp. 32 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
639 feet from ☐ N / ☑ S Line of Section
682 feet from ☑ E / ☐ W Line of Section
County: Seward

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: LANSING-KANSAS CITY A
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	1700	0	0	0	31
February	1980	0	0	0	29
March	1900	0	0	0	31
April	520	0	0	0	30
May	520	0	0	0	31
June	1734	0	0	0	30
July	552	0	0	0	31
August	528	0	0	0	31
September	520	0	0	0	30
October	2430	0	0	0	31
November	1812	0	0	0	30
December	1978	0	0	0	31
TOTAL	16174		0		

Submitted Electronically