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 # 35625
Name: Talon Group LLC
Address 1: PO BOX 700
Address 2:
City: HAYS State: KS Zip: 67601 + 0700
Contact Person: Jason Clark
Phone: (785) 656-2644
Lease Name: WIRTH A
Well Number: 2

API No.: 15-009-19067-00-02
Permit No: D12772.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NE - NW Sec. 23 Twp. 18 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
4355 feet from ☐ N / ☑ S Line of Section
3467 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 0 psi Injection Zone: ARBUCKLE
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	3038	0	0	0	31
February	2744	0	0	0	28
March	3038	0	0	0	31
April	2940	0	0	0	30
May	3038	0	0	0	31
June	2940	0	0	0	30
July	3038	0	0	0	31
August	3038	0	0	0	31
September	2940	0	0	0	30
October	3038	0	0	0	31
November	2940	0	0	0	30
December	3038	0	0	0	31
TOTAL	35770		0		

Submitted Electronically