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 # 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: PO BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: Peter Fiorini
Phone: (316) 691-9500
Lease Name: ROBBEN P
Well Number: 2

API No.: 15-179-20616-00-02
Permit No: E22267.2
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SW - NE Sec. 27 Twp. 8 S. R. 26 ☐ E ☑ W
(Q/Q/Q/Q)
3860 feet from ☐ N / ☑ S Line of Section
1617 feet from ☑ E / ☐ W Line of Section
County: Sheridan

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: 800 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 600 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	0	0			
February	0	0			
March	0	0			
April	0	0			
May	0	0			
June	0	0			
July	0	0			
August	0	0			
September	0	0			
October	5819	0			31
November	6019	0			30
December	8304	0			31
TOTAL	20142		0		

Submitted Electronically