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 # 7775
Name: Wilton Petroleum, Inc.
Address 1: PO BOX 391
Address 2:
City: CANTON State: KS Zip: 67428 + 0391
Contact Person: Bernie Rundstrom
Phone: (620) 628-4466
Lease Name: MAGIE SWD
Well Number: 2

API No.: 15-101-20595-00-01
Permit No: D20644.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NE - SE Sec. 13 Twp. 16 S. R. 30 ☐ E ☑ W
(Q/Q/Q/Q)
2538 feet from ☐ N / ☑ S Line of Section
955 feet from ☑ E / ☐ W Line of Section
County: Lane

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: 200 psi Injection Zone: CEDAR HILLS
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	11842	0	0	0	31
February	11078	0	0	0	29
March	11842	0	0	0	31
April	11460	0	0	0	30
May	5348	0	0	0	14
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	51570		0		

Submitted Electronically