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 # 33913
Name: Winterscheid Oil, LLC
Address 1: 764 RD 70
Address 2:
City: OLPE State: KS Zip: 66865 + 9336
Contact Person: Judy Schade
Phone: ( 620 ) 475-3503
Lease Name: ERICKSON
Well Number: 4

API No.: 15-073-19592-00-00
Permit No: E21482.1
Reporting Year: 2020
*(January 1 to December 31)*

NW - SW - SE - SW Sec. 17 Twp. 24 S. R. 13 ☑ E ☐ W
*(Q/Q/Q/Q)*
510 feet from ☐ N / ☑ S Line of Section
3910 feet from ☑ E / ☐ W Line of Section
County: Greenwood

**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: 350 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 200 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 | 1395 | 0 | 0 | | 31 |
| February | 1305 | 0 | 0 | | 29 |
| March | 1395 | 0 | 0 | | 31 |
| April | 1350 | 0 | 0 | | 30 |
| May | 1350 | 0 | 0 | | 31 |
| June | 1395 | 0 | 0 | | 30 |
| July | 1395 | 0 | 0 | | 31 |
| August | 1350 | 0 | 0 | | 31 |
| September | 1395 | 0 | 0 | | 30 |
| October | 1395 | 0 | 0 | | 31 |
| November | 1350 | 0 | 0 | | 30 |
| December | 1395 | 0 | 0 | | 31 |
| ***TOTAL*** | 16470 | | 0 | | |

Submitted Electronically