

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 # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Lease Name: \_\_\_\_\_  
Well Number: \_\_\_\_\_

API No.: \_\_\_\_\_  
Permit No.: \_\_\_\_\_  
Reporting Year: \_\_\_\_\_  
(January 1 to December 31)  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  E  W  
(a/a/a/a)  
\_\_\_\_\_ feet from  N /  S Line of Section  
\_\_\_\_\_ feet from  E /  W Line of Section  
County: \_\_\_\_\_

**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: \_\_\_\_\_ psi Injection Zone: \_\_\_\_\_  
Maximum Authorized Injection Rate: \_\_\_\_\_ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	<b>TOTAL</b>	_____	_____	_____	_____	_____

**Innospec**2220 S. Prospect  
Oklahoma City, Ok 73129Phone:  
Fax:**WATER ANALYSIS REPORT**

<b>Company:</b>	Wein Kauf	<b>Lab ID Number:</b>	
<b>Water Source:</b>	Frownfelter 1-20	<b>Date Sampled:</b>	6/28/18
<b>Sample Point:</b>	Well Head	<b>Date Analyzed:</b>	6/28/18

<b>Production Data:</b>	<b>BOPD:</b>	<b>BWPD:</b>	<b>MMCFD:</b>
pH:	6.40	Total Dissolved Solids (mg/L):	134,851
Dissolved H <sub>2</sub> S:	0.0	Total Ionic Strength:	2.597
Dissolved CO <sub>2</sub> :	130.0	Specific Gravity:	1.115
Resistivity @ 75°F (Ohm-Meters):	0.06140	Density, (lbs/gal):	9.30

<b>Cations</b>	<b>mg/L</b>	<b>Meq/L</b>	<b>Anions</b>	<b>mg/L</b>	<b>Meq/L</b>
Calcium:	8,467	423	Carbonate:	0	0
Magnesium:	980	80	Bicarbonate:	61	1
Sodium:	42,252	1,837	Chloride:	83,000	2,338
Barium:	11		Sulfate:	80	2
Strontium:	0		Total Hardness:	25,200	
Ferrous Iron:	0.0				
Total Dissolved Iron:	140.0				

**PROBABLE MINERAL COMPOSITION**

	<b>mg/L</b>	<b>Meq/L</b>
Calcium Bicarbonate:	81	1
Calcium Sulfate:	113	2
Calcium Chloride:	23,348	421
Magnesium Bicarbonate:	0	0
Magnesium Sulfate:	0	0
Magnesium Chloride:	3,824	80
Sodium Bicarbonate:	--	0
Sodium Sulfate:	0	0
Sodium Chloride:	107,392	1,837

**Remarks***Hydro*  *Pax*

Analyst: \_\_\_\_\_

**Innospec**2220 S. Prospect  
Oklahoma City, Ok 73129Phone:  
Fax:**SCALE DEPOSITION POTENTIAL ANALYSIS****Company:** Weinkauf  
**Water Source:** Frownfelter 1-20  
**Sample Point:** Well Head**Lab ID Number:**  
**Date Sampled:** 6/28/18  
**Date Analyzed:** 6/28/18**Brine Composition**

pH:	6.40	Ca, mg/L:	8,467	Total Hardness, mg/L:	25,200
Specific Gravity:	1.115	Mg, mg/L:	980	Total Dissolved Solids, mg/L:	134,851
HCO <sub>3</sub> , mg/L:	61	Na, mg/L:	42,252	Total Ionic Strength:	2.597
Cl, mg/L:	83,000	Ba, mg/L:	11		
SO <sub>4</sub> , mg/L:	80	Sr, mg/L:	0	Total Dissolved Iron, mg/L:	140.0

**Calcium Carbonate Scale Indices**

Specified Temperatures

Temperature, °F:	75	100	125	150	40	180
Stiff-Davis Index:	-0.50	-0.22	0.16	0.60	...	1.22
Deposition, lbs/1,000 Bbls:	-81.0	-26.5	7.1	25.4	...	32.7

**Calcium Sulfate Scale Indices**

Specified Temperatures

Temperature, °F:	75	100	125	150	40	180
Supersaturation Ratio:	0.062	0.062	0.063	0.063	0.062	0.064
Deposition, lbs/1,000 Bbls:	-605.3	-602.1	-592.5	-588.0	-603.1	-582.6

**Barium Sulfate Scale Indices**

Specified Temperatures

Temperature, °F:	75	100	125	150	40	.....
Supersaturation Ratio:	3.251	2.407	1.780	1.309	5.357	0.907
Deposition, lbs/1,000 Bbls:	4.5	3.8	2.9	1.6	5.3	-0.7

**Strontium Sulfate Scale Indices**

Specified Temperatures

Temperature, °F:	75	100	125	150	40	180
Supersaturation Ratio:	0.000	0.000	0.000	0.000	0.000	0.000
Deposition, lbs/1,000 Bbls:	-1.8	-2.5	-3.3	-4.6	-1.1	-6.6

*Attento Fax*

**SCALE DEPOSITION POTENTIAL TRENDS**

**Company:** Weinkauf  
**Water Source:** Frownfelter 1-20  
**Sample Point:** Well Head

**Lab ID Number:**  
**Date Sampled:** 6/28/18  
**Date Analyzed:** 6/28/18

