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 # 5953
Name: A. R. & R., Ltd.
Address 1: 6213 SAWGRASS PL
Address 2:
City: BARTLESVILLE State: OK Zip: 74006 + 2947
Contact Person: andy park
Phone: (620) 252-5009
Lease Name: C. THOMAS
Well Number: A-2

API No.: 15-049-22476-00-01
Permit No: D32251.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NE - SW Sec. 18 Twp. 29 S. R. 13 ☑ E ☐ W
(Q/Q/Q/Q)
1889 feet from ☐ N / ☑ S Line of Section
3534 feet from ☑ E / ☐ W Line of Section
County: Elk

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: 300 psi Injection Zone: MISSISSIPPIAN
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	100	0			10
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
TOTAL	100		0		

Submitted Electronically