

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	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Complete Water Analysis Report

Customer: SHAKESPEARE OIL COMPANY
 Region: Kansas
 Location: Lane County
 System: Production System

Equipment: Gail 1-21
 Sample Point: Bleeder
 Sample ID: AQ70660
 Acct Rep Email: Michael.Walters@championx.com

Collection Date: 02/10/2021
 Receive Date: 02/10/2021
 Report Date: 02/11/2021
 Location Code: 430673

Field Analysis

Bicarbonate	273 mg/L	Dissolved CO2	158 mg/L	Dissolved H2S	58 mg/L
Pressure Surface	25 psi	Temperature	100 ° F	pH of Water	7.5

Sample Analysis

Conductivity (Calculated)	77641 µS - cm3	Ionic Strength	0.89 mol/L	Resistivity	0.129 ohms - m
Specific Gravity	1.037	Total Dissolved Solids	49690.31 mg/L		

Cations

Iron	<0.1 mg/L	Manganese	<0 mg/L	Barium	0.256 mg/L
Strontium	34.65 mg/L	Calcium	527.6 mg/L	Magnesium	276.8 mg/L
Sodium	17620.00 mg/L				

Anions

Chloride	28640 mg/L	Sulfate	2318 mg/L
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Scale Type

Anhydrite CaSO4 PTB	N/A	Anhydrite CaSO4 SI	-0.94
Barite BaSO4 PTB	0.1	Barite BaSO4 SI	0.38
Calcite CaCO3 PTB	N/A	Calcite CaCO3 SI	-0.04
Celestite SrSO4 PTB	N/A	Celestite SrSO4 SI	-0.07
Gypsum CaSO4 PTB	N/A	Gypsum CaSO4 SI	-0.81
Hemihydrate CaSO4 PTB	N/A	Hemihydrate CaSO4 SI	-0.78

Comments

Scaling predictions calculated using Odco-Tomson model

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