

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	_____	_____	_____	_____	_____

Submitted Electronically

Complete Water Analysis Report

Customer: SHAKESPEARE OIL COMPANY

Region: Kansas

Location: Lane County

System: Production System

Equipment: Ehmke 2-29

Sample Point: Bleeder

Sample ID: AQ70659

Acct Rep Email: Michael.Walters@championx.com

Collection Date: 02/10/2021

Receive Date: 02/10/2021

Report Date: 02/11/2021

Location Code: 430672

Field Analysis

Bicarbonate	454 mg/L	Dissolved CO2	132 mg/L	Dissolved H2S	173 mg/L
Pressure Surface	25 psi	Temperature	100 ° F	pH of Water	7.5

Sample Analysis

Conductivity (Calculated)	75154 µS - cm3	Ionic Strength	0.87 mol/L	Resistivity	0.133 ohms - m
Specific Gravity	1.037	Total Dissolved Solids	48098.5 mg/L		

Cations

Iron	<0.1 mg/L	Manganese	<0 mg/L	Barium	0.242 mg/L
Strontium	27.96 mg/L	Calcium	699.2 mg/L	Magnesium	296.1 mg/L
Sodium	16390.00 mg/L				

Anions

Chloride	27406 mg/L	Sulfate	2825 mg/L
----------	------------	---------	-----------

Scale Type

Anhydrite CaSO4 PTB		N/A	Anhydrite CaSO4 SI		-0.74
Barite BaSO4 PTB		0.1	Barite BaSO4 SI		0.44
Calcite CaCO3 PTB		67.2	Calcite CaCO3 SI		0.31
Celestite SrSO4 PTB		N/A	Celestite SrSO4 SI		-0.09
Gypsum CaSO4 PTB		N/A	Gypsum CaSO4 SI		-0.61
Hemihydrate CaSO4 PTB		N/A	Hemihydrate CaSO4 SI		-0.58

Comments

Scaling predictions calculated using Odco-Tomson model

This document contains the confidential and/or proprietary information of ChampionX. The recipient agrees to maintain the confidentiality of the terms of this document, and shall not reproduce it by any means, disclose the contents of it to any third party, or use the contents of it for any purpose other than the purpose for which it was intended by ChampionX.

02/15/2021