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 # 4085
Name: King, Tom dba King Energy Co.
Address 1: 2 TIMBER DR
Address 2:
City: IOLA State: KS Zip: 66749 + 1608
Contact Person: Tom King
Phone: (620) 496-7052
Lease Name: CANADY (NELSON)
Well Number: I-1

API No.: 15-001-02301-00-00
Permit No: D19703.0
Reporting Year: 2020
(January 1 to December 31)

SW - SE - SE - NE Sec. 26 Twp. 23 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
2890 feet from ☐ N / ☑ S Line of Section
500 feet from ☑ E / ☐ W Line of Section
County: Allen

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: 200 psi Injection Zone: KANSAS CITY
Maximum Authorized Injection Rate: 20 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	0	0			0
February	0	0			0
March	0	0			0
April	110	100			11
May	180	100			18
June	0	0			0
July	0	0			0
August	0	0			0
September	60	80			6
October	155	100			15
November	0	0			0
December	0	0			0
TOTAL	505		0		

Submitted Electronically