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 # 30624
Name: Meyer, Theodore J.
Address 1: 761 N CHICASKIA RD
Address 2:
City: CONWAY SPRINGS State: KS Zip: 67031 + 8012
Contact Person: Ted Meyer
Phone: (620) 456-2955
Lease Name: R B MEYER B
Well Number: 1

API No.: 15-191-01585-00-01
Permit No: E31565.1
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - SE Sec. 12 Twp. 31 S. R. 3 ☐ E ☑ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
2310 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: Lansing KC
Maximum Authorized Injection Rate: 1000 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	1200	200	0	0	31
February	1150	200	0	0	29
March	1225	200	0	0	31
April	1300	200	0	0	30
May	1200	200	0	0	31
June	950	200	0	0	30
July	1100	200	0	0	31
August	1250	200	0	0	31
September	1300	200	0	0	30
October	1210	200	0	0	31
November	1150	200	0	0	30
December	1250	200	0	0	31
TOTAL	14285		0		

Submitted Electronically