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 # 5386
Name: Production Drilling, Inc.
Address 1: 1023 RESERVATION RD
Address 2:
City: HAYS State: KS Zip: 67601 + 3982
Contact Person: Nick Gabel
Phone: (785) 625-1189
Lease Name: SCHOELLER
Well Number: 1

API No.: 15-163-22211-00-01
Permit No: D24587.0
Reporting Year: 2020
(January 1 to December 31)

____ - SE - NE - NE Sec. 31 Twp. 7 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
4363 feet from ☐ N / ☑ S Line of Section
367 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 0 psi Injection Zone: ARBUCKLE
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	3565				31
February	3335				29
March	3565				31
April	3450				30
May	0				0
June	3450				30
July	3565				31
August	3565				31
September	3450				30
October	3565				31
November	3450				30
December	3565				31
TOTAL	38525		0		

Submitted Electronically