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 # 30275
Name: Reddig, Roger L. dba Clover Oil Company
Address 1: PO BOX 173
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0173
Contact Person: Roger Reddig
Phone: (785) 483-3085
Lease Name: BASGALL B
Well Number: 1

API No.: 15-165-20138-00-01
Permit No: E19214.1
Reporting Year: 2020
(January 1 to December 31)

____ - NE - NW - SE Sec. 3 Twp. 16 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
2294 feet from ☐ N / ☑ S Line of Section
1671 feet from ☑ E / ☐ W Line of Section
County: Rush

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: 1000 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 320 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	1457				31
February	1316				29
March	1457				31
April	1410				30
May	1457				31
June	1410				30
July	1457				31
August	1457				31
September	1410				30
October	1457				31
November	1410				30
December	1457				31
TOTAL	17155		0		

Submitted Electronically