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 # 35397
Name: Duke Oil & Gas Company, LLC
Address 1: PO BOX 751
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 0751
Contact Person: Phillip Frick
Phone: (785) 883-4057
Lease Name: ALEXANDER
Well Number: W 19

API No.: 15-207-01174-00-01
Permit No: E29082.5
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - SE Sec. 2 Twp. 24 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
2600 feet from ☐ N / ☑ S Line of Section
2460 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 750 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 150 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 34 *(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	0	0
February	0	0	0	0	0
March	93	400	0	0	10
April	402	400	0	0	30
May	336	400	0	0	31
June	393	400	0	0	30
July	366	400	0	0	31
August	429	400	0	0	31
September	345	400	0	0	30
October	395	400	0	0	31
November	372	400	0	0	30
December	373	400	0	0	31
TOTAL	3504		0		

Submitted Electronically