

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Lease Name: _____

Well Number: _____

API No.: _____

Permit No.: _____

Reporting Year: _____

(January 1 to December 31)

____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)_____ feet from N / S Line of Section_____ feet from E / W Line of Section

County: _____

I. Injection Fluid:Type (Pick one): Fresh Water Treated Brine Untreated Brine Water/BrineSource: 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: _____ psi Injection Zone: _____

Maximum Authorized Injection Rate: _____ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Submitted Electronically



THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS
CONSERVATION DIVISION

DISPOSAL WELL PERMIT

Oper. License #: 31819

Permit: D-30,948

Operator: Cholla Production, LLC

Well Name & No.: Stithem #2-4

Address: 7851 South Elati Street, Suite 201

Location: 660' FSL 1650' FEL

City: Littleton

Sec. 4 Twp 11 Rge 23 (E) (W)

State: Colorado

County: Trego

Project Acreage: SE/4 Sec. 4-T11S-R14W

After reviewing the operator's application for Disposal Well Permit dated August 15, 2011, the Conservation Division grants a permit for the injection of produced saltwater or other fluids approved by the Conservation Division. The permitted well is subject to the specifications and requirements of this permit including any attachments or any attached amendments.

- The injection formation is known as the Arbuckle.
- The depth of the permitted injection interval is from 4063' to 4252', (PF), (OH)
- The maximum authorized injection rate is 500 barrels of fluid per day.
- The maximum authorized injection pressure is 200 PSIG.
- Attachment. YES, NO.

Complete casing information is as follows:

	SIZE	SEAT DEPTH	INTERVAL CEMENTED	SACKS CEMENT USED
Surface	8 5/8"	189'	0' to 189'	175
Production	5 1/2"	4063'	2765' to 4063'	150
Tubing	2 3/8"	4020'		

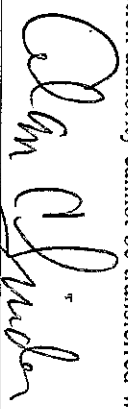
Additional Cementing: DV Tool @ 1768'. Cement to surface w/400 sx
Packer type and setting depth: Model AD-1 @ 4020'.

Well(s), Lease(s) and Facilities supplying fluid for injection:

Lease Operator	Lease Name	Lease Description
Cholla Production, LLC	Stithem	SE/4 Sec. 4-T11S-R23W
Cholla Production, LLC	Denison	SW/4 & S/2 NW/4 10-T11S-R23W

In addition to the specific permit conditions and requirements set out above or on the attachment hereto, this permit is subject to all of the provisions of K.A.R. 83-3-400 et seq. Injection authority cannot be transferred without approval of the Conservation Division.

Date of Approval: September 15, 2011


Director, Underground Injection Control
Conservation Division

Summary of Changes

Lease Name and Number: STITHEM 2-4

Doc ID: 1560550

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	02/26/2021	03/01/2021
Location Info Button	https://kolartest.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=4	https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=4&to
Save Link	../../kcc/detail/operatorEditDetail.cfm?docID=1560091	../../kcc/detail/operatorEditDetail.cfm?docID=1560550

Summary of Attachments

Lease Name and Number: STITHEM 2-4

API: 15-195-01358-00-01

Doc ID: 1560550

Correction Number: 1

Attachment Name

Disposal Permit