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 # 32062
Name: ARDC INC.
Address 1: 108 W 34TH ST
Address 2:
City: HAYS State: KS Zip: 67601 + 1629
Contact Person: Greg Whitehair
Phone: ( 785 ) 625-6588
Lease Name: LUCAS
Well Number: 1

API No.: 15-009-19039-00-01
Permit No: E15218.3
Reporting Year: 2020
*(January 1 to December 31)*

____ - NE - SW - NW Sec. 4 Twp. 19 S. R. 12 ☐ E ☑ W
*(Q/Q/Q/Q)*
3630 feet from ☐ N / ☑ S Line of Section
4290 feet from ☑ E / ☐ W Line of Section
County: Barton

**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: 900 psi Injection Zone: LANSING-KANSAS CITY
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 | 3150 | 0 | 0 | 0 | 31 |
| February | 2800 | 0 | 0 | 0 | 28 |
| March | 3100 | 0 | 0 | 0 | 31 |
| April | 3000 | 0 | 0 | 0 | 30 |
| May | 3100 | 0 | 0 | 0 | 31 |
| June | 3000 | 0 | 0 | 0 | 30 |
| July | 3100 | 0 | 0 | 0 | 31 |
| August | 3050 | 0 | 0 | 0 | 31 |
| September | 3000 | 0 | 0 | 0 | 30 |
| October | 3200 | 0 | 0 | 0 | 31 |
| November | 3150 | 0 | 0 | 0 | 30 |
| December | 3100 | 0 | 0 | | 31 |
| ***TOTAL*** | 36750 | | 0 | | |

Submitted Electronically