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 # 5010
Name: Knighton Oil Company, Inc.
Address 1: 1700 N WATERFRONT PKWY BLDG 100 STE A
Address 2:
City: WICHITA State: KS Zip: 67206 + 6627
Contact Person: Chris Toy
Phone: ( 316 ) 630-9905
Lease Name: CAROLYN
Well Number: 3

API No.: 15-101-22220-00-00
Permit No: D30656.0
Reporting Year: 2020
*(January 1 to December 31)*

E2 - SW - SW - SE Sec. 33 Twp. 18 S. R. 30 ☐ E ☑ W
*(Q/Q/Q/Q)*
330 feet from ☐ N / ☑ S Line of Section
2183 feet from ☑ E / ☐ W Line of Section
County: Lane

**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: Cedar Hills
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 992 | 0 | 0 | 0 | 31 |
| February | 896 | 0 | 0 | 0 | 29 |
| March | 992 | 0 | 0 | 0 | 31 |
| April | 639 | 0 | 0 | 0 | 30 |
| May | 660 | 0 | 0 | 0 | 31 |
| June | 960 | 0 | 0 | 0 | 30 |
| July | 992 | 0 | 0 | 0 | 31 |
| August | 992 | 0 | 0 | 0 | 31 |
| September | 960 | 0 | 0 | 0 | 30 |
| October | 992 | 0 | 0 | 0 | 31 |
| November | 960 | 0 | 0 | 0 | 30 |
| December | 992 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 11027 | | 0 | | |

Submitted Electronically