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 # 33288
Name: Manning, Gregory
Address 1: 574 SE 130 AVE
Address 2:
City: ELLINWOOD State: KS Zip: 67526 + 9270
Contact Person: Gregory Manning
Phone: (620) 564-2302
Lease Name: LIPP
Well Number: 2

API No.: 15-159-19189-00-01
Permit No: E13650.1
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SW - NE Sec. 11 Twp. 21 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
3628 feet from ☐ N / ☑ S Line of Section
1689 feet from ☑ E / ☐ W Line of Section
County: Rice

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: 1500 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	250				31
February	350				29
March	900				31
April	1500				30
May	1450				31
June	1500				30
July	1250				31
August	1200				31
September	1250				30
October	950				31
November	1250				30
December	1000				31
TOTAL	12850		0		

Submitted Electronically