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 # 6279
Name: Patrick Development Corporation
Address 1: 3408 W 93RD ST
Address 2:
City: LEAWOOD State: KS Zip: 66206 + 2005
Contact Person: kerry patrick
Phone: ( 913 ) 375-8368
Lease Name: GRAY PDC
Well Number: 7

API No.: 15-207-26739-00-01
Permit No: E08990.49
Reporting Year: 2020
*(January 1 to December 31)*

____ - ____ - SE - SE Sec. 18 Twp. 26 S. R. 17 ☑ E ☐ W
*(Q/Q/Q/Q)*
1216 feet from ☐ N / ☑ S Line of Section
265 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: 800 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 300 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 | 150 | 350 | | | 20 |
| February | 200 | 350 | | | 20 |
| March | 200 | 350 | | | 20 |
| April | 200 | 350 | | | 20 |
| May | 200 | 350 | | | 20 |
| June | 200 | 350 | | | 20 |
| July | 200 | 350 | | | 20 |
| August | 200 | 350 | | | 20 |
| September | 200 | 350 | | | 20 |
| October | 200 | 350 | | | 20 |
| November | 200 | 350 | | | 20 |
| December | 200 | 350 | | | 20 |
| ***TOTAL*** | 2350 | | 0 | | |

Submitted Electronically