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 # 34192
Name: SandRidge Exploration and Production LLC
Address 1: 1 E SHERIDAN AVE STE 500
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73104 + 2494
Contact Person: Collette Davis
Phone: (405) 209-2407
Lease Name: ROCKY SWD 3306
Well Number: 1-16

API No.: 15-077-22086-00-00
Permit No: D32007.0
Reporting Year: 2020
(January 1 to December 31)

NW - SE - SE - NW Sec. 16 Twp. 33 S. R. 6 ☐ E ☑ W
(Q/Q/Q/Q)
2286 feet from ☑ N / ☐ S Line of Section
2230 feet from ☐ E / ☑ W Line of Section
County: Harper

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: 500 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 32000 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically