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 # 33905
Name: Royal Drilling Inc
Address 1: 2319 E. US HIGHWAY 40
Address 2: PO BOX 342
City: RUSSELL State: KS Zip: 67665 + 0342
Contact Person: John Driscoll
Phone: (785) 483-9580
Lease Name: DESAIR
Well Number: 2

API No.: 15-065-01538-00-02
Permit No: D30806.0
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SE - SE Sec. 26 Twp. 9 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
917 feet from ☐ N / ☑ S Line of Section
1042 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 750 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	6000				31
February	6000				28
March	6200				31
April	6100				30
May	6200				31
June	5000				30
July	6100				31
August	6200				31
September	6000				30
October	6200				31
November	6000				30
December	6100				31
TOTAL	72100		0		

Submitted Electronically