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 # 5046
Name: Raymond Oil Company, Inc.
Address 1: PO BOX 48788
Address 2:
City: WICHITA State: KS Zip: 67201 + 8788
Contact Person: Jason Rucker
Phone: ( 316 ) 267-4214
Lease Name: ROSE SWD
Well Number: 1

API No.: 15-109-20870-00-01
Permit No: D30914.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - NW - NE - SW Sec. 11 Twp. 14 S. R. 32 ☐ E ☑ W
*(Q/Q/Q/Q)*
2095 feet from ☐ N / ☑ S Line of Section
3569 feet from ☑ E / ☐ W Line of Section
County: Logan

**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: ARBUCKLE
Maximum Authorized Injection Rate: 6000 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 | 13179 | 0 | 0 | | 31 |
| February | 7438 | 0 | 0 | | 28 |
| March | 12206 | 0 | 0 | | 31 |
| April | 12062 | 0 | 0 | | 30 |
| May | 12547 | 0 | 0 | | 31 |
| June | 12091 | 0 | 0 | | 30 |
| July | 13107 | 0 | 0 | | 31 |
| August | 11877 | 0 | 0 | | 31 |
| September | 10865 | 0 | 0 | | 30 |
| October | 10895 | 0 | 0 | | 30 |
| November | 12792 | 0 | 0 | | 30 |
| December | 12812 | 0 | 0 | | 31 |
| ***TOTAL*** | 141871 | | 0 | | |

Submitted Electronically