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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: SHEA
Well Number: 2-17 SWD

API No.: 15-077-21782-00-01
Permit No: D31001.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - SE - SE - SE Sec. 17 Twp. 35 S. R. 7 ☐ E ☑ W
*(Q/Q/Q/Q)*
357 feet from ☐ N / ☑ S Line of Section
236 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: 1600 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 40000 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 | 31 |
| February | 0 | 0 | 0 | 0 | 28 |
| March | 0 | 0 | 0 | 0 | 31 |
| April | 0 | 0 | 0 | 0 | 30 |
| May | 0 | 0 | 0 | 0 | 31 |
| June | 0 | 0 | 0 | 0 | 30 |
| July | 0 | 0 | 0 | 0 | 31 |
| August | 0 | 0 | 0 | 0 | 31 |
| September | 0 | 0 | 0 | 0 | 30 |
| October | 0 | 0 | 0 | 0 | 31 |
| November | 0 | 0 | 0 | 0 | 30 |
| December | 0 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 0 | | 0 | | |

Submitted Electronically