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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: ( 918 ) 492-9797
Lease Name: RINGWALD B
Well Number: SWD 1

API No.: 15-159-20956-00-01
Permit No: D20312.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - ____ - ____ - NW Sec. 5 Twp. 20 S. R. 10 ☐ E ☑ W
*(Q/Q/Q/Q)*
3960 feet from ☐ N / ☑ S Line of Section
3960 feet from ☑ E / ☐ W Line of Section
County: Rice

**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: 100 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 10000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 111337 | 0 | 0 | 0 | 31 |
| February | 103490 | 0 | 0 | 0 | 28 |
| March | 114522 | 0 | 0 | 0 | 31 |
| April | 109855 | 0 | 0 | 0 | 30 |
| May | 110161 | 0 | 0 | 0 | 31 |
| June | 105945 | 0 | 0 | 0 | 30 |
| July | 108909 | 0 | 0 | 0 | 31 |
| August | 90626 | 0 | 0 | 0 | 31 |
| September | 114163 | 0 | 0 | 0 | 30 |
| October | 116565 | 0 | 0 | 0 | 31 |
| November | 87947 | 0 | 0 | 0 | 30 |
| December | 114219 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 1287739 | | 0 | | |

Submitted Electronically