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 # 7775
Name: Wilton Petroleum, Inc.
Address 1: PO BOX 391
Address 2:
City: CANTON State: KS Zip: 67428 + 0391
Contact Person: Bernie Rundstrom
Phone: (620) 628-4466
Lease Name: APPLEMAN TWIN
Well Number: SWD

API No.: 15-067-21807-00-00
Permit No: D32128.0
Reporting Year: 2021
(January 1 to December 31)

S2 - NE - SE - SE Sec. 36 Twp. 27 S. R. 35 ☐ E ☑ W
(Q/Q/Q/Q)
690 feet from ☐ N / ☑ S Line of Section
330 feet from ☑ E / ☐ W Line of Section
County: Grant

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: 500 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	14818	0	0	0	31
February	7170	0	0	0	15
March	14818	0	0	0	31
April	14340	0	0	0	30
May	14340	0	0	0	30
June	14340	0	0	0	30
July	14818	0	0	0	31
August	14818	0	0	0	31
September	14340	0	0	0	30
October	14340	0	0	0	30
November	14340	0	0	0	30
December	14340	0	0	0	30
TOTAL	166822		0		

Submitted Electronically