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 # 34047
Name: Ron-Bob Oil LLC
Address 1: 1607 MAIN ST.
Address 2:
City: NEOSHO FALLS State: KS Zip: 66758 + 4033
Contact Person: ROBERT CHRIESTENSON
Phone: (620) 365-0919
Lease Name: LAWRENCE BARR
Well Number: 2-W

API No.: 15-207-25573-00-00
Permit No: E25712.2
Reporting Year: 2021
(January 1 to December 31)

____ - SE - NW - NW Sec. 20 Twp. 26 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
4580 feet from ☐ N / ☑ S Line of Section
4513 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 500 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 40 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	682	320			31
February	616	320			28
March	682	320			31
April	660	320			30
May	682	320			31
June	660	320			30
July	682	320			31
August	682	320			31
September	660	320			30
October	682	320			31
November	660	320			30
December	682	320			31
TOTAL	8030		0		

Submitted Electronically