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 # 35724
Name: L&DWG LLC
Address 1: 977 UU RD
Address 2:
City: COPELAND State: KS Zip: 67837 + 7036
Contact Person: LARRY2021
Phone: (620) 272-1316
Lease Name: FLETCHER
Well Number: 1

API No.: 15-081-20063-00-01
Permit No: D19821.0
Reporting Year: 2021
(January 1 to December 31)

____ - ____ - NE - SW Sec. 10 Twp. 29 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
2614 feet from ☐ N / ☑ S Line of Section
2730 feet from ☑ E / ☐ W Line of Section
County: Haskell

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: 80 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					
February					
March					
April					
May	300				8
June	1600				25
July	2000				28
August	2000				28
September	800				12
October					
November					
December					
TOTAL	6700		0		

Submitted Electronically