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: MENTZER
Well Number: 12

API No.: 15-207-21473-00-00
Permit No: E19038.2
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SE - SE Sec. 34 Twp. 23 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
888 feet from ☐ N / ☑ S Line of Section
1127 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: 400 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 100 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	620	275			31
February	560	275			28
March	620	275			31
April	600	275			30
May	620	275			31
June	600	275			30
July	620	275			31
August	620	275			31
September	600	275			30
October	620	275			31
November	600	275			30
December	620	275			31
TOTAL	7300		0		

Submitted Electronically