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 # 5150
Name: Colt Energy Inc
Address 1: PO BOX 388
Address 2:
City: IOLA State: KS Zip: 66749 + 0388
Contact Person: Michelle Eldridge
Phone: (620) 365-3111
Lease Name: COLTRANE/WADE
Well Number: RW 4

API No.: 15-001-28405-00-00
Permit No: E10334.21
Reporting Year: 2021
(January 1 to December 31)

____ - SE - NE - NW Sec. 23 Twp. 25 S. R. 19 ☑ E ☐ W
(Q/Q/Q/Q)
4152 feet from ☐ N / ☑ S Line of Section
2884 feet from ☑ E / ☐ W Line of Section
County: Allen

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☑ Treated Brine ☐ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 0 mg/l Specific Gravity: 0.00 Additives: Inhibitor & biocide
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 650 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 50 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 36 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	581	560	0	0	31
February	534	560	0	0	28
March	568	460	0	0	31
April	439	375	0	0	30
May	581	540	0	0	31
June	579	420	0	0	30
July	551	400	0	0	31
August	561	420	0	0	31
September	588	480	0	0	30
October	554	380	0	0	31
November	605	470	0	0	30
December	631	460	0	0	31
TOTAL	6772		0		

Submitted Electronically