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 # 32147
Name: K.E. Snyder Co., LLC
Address 1: PO BOX 107
Address 2:
City: HAMILTON State: KS Zip: 66853 + 0107
Contact Person: Lance Snyder
Phone: (620) 678-3613
Lease Name: SCHAEFER
Well Number: 12 A

API No.: 15-073-30379-00-02
Permit No: E25458.3
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SE - SE Sec. 27 Twp. 23 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
990 feet from ☐ N / ☑ S Line of Section
990 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 250 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 300 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	6960	190	0	0	29
February	2640	200	0	0	11
March	6960	200	0	0	29
April	7200	180	0	0	30
May	7440	200	0	0	31
June	7200	180	0	0	3
July	7440	180	0	0	31
August	7440	180	0	0	31
September	4320	50	0	0	18
October	5520	50	0	0	23
November	2400	50	0	0	10
December	7200	180	0	0	30
TOTAL	72720		0		

Submitted Electronically