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 # 30606
Name: Murfin Drilling Co., Inc.
Address 1: 250 N WATER STE 300
Address 2:
City: WICHITA State: KS Zip: 67202 + 1216
Contact Person: Michelle Howell
Phone: (316) 267-3241
Lease Name: STITES
Well Number: 1-31

API No.: 15-039-20920-00-00
Permit No: D27953.0
Reporting Year: 2021
(January 1 to December 31)

____ - SE - NW - NE Sec. 31 Twp. 2 S. R. 26 ☐ E ☑ W
(Q/Q/Q/Q)
4134 feet from ☐ N / ☑ S Line of Section
1755 feet from ☑ E / ☐ W Line of Section
County: Decatur

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: 500 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	602	0	0	0	30
May	608	0	0	0	31
June	510	0	0	0	30
July	570	0	0	0	31
August	569	0	0	0	31
September	503	0	0	0	30
October	524	0	0	0	31
November	581	0	0	0	30
December	600	0	0	0	31
TOTAL	5067		0		

Submitted Electronically