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 # 35252
Name: Arcadian Resources, LLC
Address 1: 313 E KANSAS ST
Address 2:
City: GLEN ELDER State: KS Zip: 67446 + 9416
Contact Person: Jim Deverman
Phone: (785) 639-1808
Lease Name: WILLIAM WALZ
Well Number: 2

API No.: 15-195-00978-00-02
Permit No: D19082.0
Reporting Year: 2021
(January 1 to December 31)

NE - NE - SE - NE Sec. 11 Twp. 11 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
3655 feet from ☐ N / ☑ S Line of Section
399 feet from ☑ E / ☐ W Line of Section
County: Trego

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: 100 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 400 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
February	0	0			0
March	185	0			31
April	0	0			0
May	0	0			0
June	185	0			30
July	185	0			31
August	185	0			31
September	0	0			0
October	0	0			0
November	0	0			0
December	0	0			0
TOTAL	740		0		

Submitted Electronically