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 # 30525
Name: Langston Oil & Gas LLC
Address 1: 310 W CENTRAL AVE STE 202
Address 2:
City: WICHITA State: KS Zip: 67202 + 1004
Contact Person: DS Langston
Phone: (620) 786-0874
Lease Name: R. C. FRANTZ
Well Number: 6-2

API No.: 15-191-01547-00-02
Permit No: D08099.0
Reporting Year: 2021
(January 1 to December 31)

S2 - N2 - SW - SE Sec. 8 Twp. 31 S. R. 3 ☐ E ☑ W
(Q/Q/Q/Q)
810 feet from ☐ N / ☑ S Line of Section
1980 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: 1000 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1200 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				
February	0				
March	0				
April	0				
May	0				
June	0				
July	0				
August	0				
September	0				
October	0				
November	0				
December	0				
TOTAL	0		0		

Submitted Electronically