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 # 7023
Name: Klima Well Service, Inc.
Address 1: 1317 VAN FLEET LN
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 6313
Contact Person: Dennis Klima
Phone: (620) 786-1031
Lease Name: SUCHY
Well Number: 2

API No.: 15-009-24018-00-01
Permit No: D28448.0
Reporting Year: 2021
(January 1 to December 31)

____ - E2 - NE - NW Sec. 27 Twp. 19 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
4711 feet from ☐ N / ☑ S Line of Section
3071 feet from ☑ E / ☐ W Line of Section
County: Barton

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: ARBUCKLE,GRANIT WASH
Maximum Authorized Injection Rate: 3500 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	22750				13
February	35010				20
March	45630				26
April	0				0
May	42720				24
June	52560				30
July	53110				30
August	53895				31
September	51680				30
October	45824				26
November	52900				30
December	17786				10
TOTAL	473865		0		

Submitted Electronically