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 # 3911
Name: Rama Operating Co., Inc.
Address 1: 101 S MAIN ST
Address 2: P.O. Box 159
City: STAFFORD State: KS Zip: 67578 + 1429
Contact Person: Robin Austin
Phone: (620) 234-5191
Lease Name: NRSU
Well Number: 3

API No.: 15-151-11012-00-01
Permit No: E13954.3
Reporting Year: 2022
(January 1 to December 31)

____ - NW - NW - NW Sec. 30 Twp. 27 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
4960 feet from ☐ N / ☑ S Line of Section
4836 feet from ☑ E / ☐ W Line of Section
County: Pratt

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: 1200 psi Injection Zone: Viola
Maximum Authorized Injection Rate: 1400 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(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	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	7000	0	0	0	28
November	7500	0	0	0	30
December	7750	0	0	0	31
TOTAL	22250		0		

Submitted Electronically