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 # 3581
Name: Red Oak Energy, Inc.
Address 1: 7701 E KELLOGG DR STE 710
Address 2:
City: WICHITA State: KS Zip: 67207 + 1738
Contact Person: Ryan Davis
Phone: ( 316 ) 652-7373
Lease Name: COLLINGWOOD TRUST
Well Number: 1-27

API No.: 15-203-20287-00-00
Permit No: D32113.0
Reporting Year: 2022
*(January 1 to December 31)*

SW - NW - SE - SW Sec. 27 Twp. 20 S. R. 38 ☐ E ☑ W
*(Q/Q/Q/Q)*
752 feet from ☐ N / ☑ S Line of Section
3887 feet from ☑ E / ☐ W Line of Section
County: Wichita

**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: 500 psi Injection Zone: COUNCIL GROVE
Maximum Authorized Injection Rate: 1000 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 | 0 | | 0 | | 0 |
| April | 0 | | 0 | | 0 |
| May | 0 | | 0 | | 0 |
| June | 0 | | 0 | | 0 |
| July | 0 | | 0 | | 0 |
| August | 0 | | 0 | | 0 |
| September | 0 | | 0 | | 0 |
| October | 0 | | 0 | | 0 |
| November | 0 | | 0 | | 0 |
| December | 0 | | 0 | | 0 |
| ***TOTAL*** | 0 | | 0 | | |

Submitted Electronically