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 # 7049
Name: Rapid Well Service, Inc.
Address 1: PO BOX 208
Address 2:
City: RUSSELL State: KS Zip: 67665 + 0208
Contact Person: Kirk Karst
Phone: (785) 483-8053
Lease Name: BRUNGARDT
Well Number: 2

API No.: 15-051-00300-00-02
Permit No: D20574.0
Reporting Year: 2022
(January 1 to December 31)

____ - NE - SW - NE Sec. 26 Twp. 12 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
3578 feet from ☐ N / ☑ S Line of Section
1749 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: CEDAR HILLS
Maximum Authorized Injection Rate: 90 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	896				31
February	800				28
March	992				31
April	928				30
May	992				31
June	960				30
July	960				31
August	992				31
September	928				30
October	992				31
November	896				30
December	992				31
TOTAL	11328		0		

Submitted Electronically