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 # 30729
Name: Gabel, Craig
Address 1: 150 E. 44TH ST. S.
Address 2:
City: WICHITA State: KS Zip: 67216 + 1712
Contact Person: Craig Allen Gabel
Phone: (316) 806-3300
Lease Name: RINKER SWDW
Well Number: 1

API No.: 15-173-01036-00-01
Permit No: D27383.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - SE - SE Sec. 32 Twp. 29 S. R. 1 ☑ E ☐ W
(Q/Q/Q/Q)
306 feet from ☐ N / ☑ S Line of Section
345 feet from ☑ E / ☐ W Line of Section
County: Sedgwick

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
Maximum Authorized Injection Rate: 500 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	13175	0	0	0	31
February	11900	0	0	0	28
March	13175	0	0	0	31
April	12750	0	0	0	30
May	13175	0	0	0	31
June	12750	0	0	0	30
July	13175	0	0	0	31
August	13175	0	0	0	31
September	12750	0	0	0	30
October	13175	0	0	0	31
November	12750	0	0	0	30
December	13175	0	0	0	31
TOTAL	155125		0		

Submitted Electronically