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 # 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: PO BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: Peter Fiorini
Phone: (316) 691-9500
Lease Name: BROWN A J
Well Number: 2

API No.: 15-055-20115-00-02
Permit No: E27194.1
Reporting Year: 2023
(January 1 to December 31)

____ - ____ - SE - NW Sec. 19 Twp. 25 S. R. 34 ☐ E ☑ W
(Q/Q/Q/Q)
3499 feet from ☐ N / ☑ S Line of Section
3154 feet from ☑ E / ☐ W Line of Section
County: Finney

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: ST LOUIS
Maximum Authorized Injection Rate: 1500 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	12354	0	0	0	31
February	11159	0	0	0	28
March	12354	0	0	0	31
April	11956	0	0	0	30
May	12354	0	0	0	31
June	11956	0	0	0	30
July	9564	0	0	0	25
August	0	0	0	0	0
September	0	0	0	0	0
October	1196	0	0	0	10
November	7173	0	0	0	30
December	12354	0	0	0	31
TOTAL	102420		0		

Submitted Electronically