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: KLITZKE"5B-32D"
Well Number: 2

API No.: 15-135-22966-00-03
Permit No: E32232.1
Reporting Year: 2023
(January 1 to December 31)

____ - SW - SW - SE Sec. 32 Twp. 16 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
313 feet from ☐ N / ☑ S Line of Section
2300 feet from ☑ E / ☐ W Line of Section
County: Ness

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: 1000 psi Injection Zone: Mississippian
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	4593	0	0	0	31
February	5192	0	0	0	28
March	5457	0	0	0	31
April	5645	0	0	0	30
May	5833	0	0	0	31
June	2634	0	0	0	30
July	5833	0	0	0	31
August	5833	0	0	0	31
September	5645	0	0	0	30
October	5833	0	0	0	31
November	4516	0	0	0	30
December	5833	0	0	0	31
TOTAL	62847		0		

Submitted Electronically