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: STUCKY 36D
Well Number: 4

API No.: 15-109-20967-00-02
Permit No: E30845.1
Reporting Year: 2023
(January 1 to December 31)

____ - W2 - NE - SE Sec. 36 Twp. 13 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
2162 feet from ☐ N / ☑ S Line of Section
1085 feet from ☑ E / ☐ W Line of Section
County: Logan

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: JOHNSON,FORT SCOTT,MYRICK STATION,LANSING-KANSAS CI
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	3519	0	0	0	31
February	3149	0	0	0	28
March	4510	0	0	0	31
April	3740	0	0	0	30
May	4629	0	0	0	31
June	3858	0	0	0	30
July	3710	0	0	0	31
August	3950	0	0	0	31
September	4060	0	0	0	30
October	5281	0	0	0	31
November	4780	0	0	0	30
December	4590	0	0	0	31
TOTAL	49776		0		

Submitted Electronically