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 # 5010
Name: Knighton Oil Company, Inc.
Address 1: 1700 N WATERFRONT PKWY BLDG 100 STE A
Address 2:
City: WICHITA State: KS Zip: 67206 + 6627
Contact Person: Chris Toy
Phone: (316) 630-9905
Lease Name: HAMMOND
Well Number: B-2

API No.: 15-185-10109-00-01
Permit No: E21415.1
Reporting Year: 2023
(January 1 to December 31)

____ - SW - SE - SW Sec. 9 Twp. 25 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
336 feet from ☐ N / ☑ S Line of Section
3605 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: Lansing
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	914	0	0	0	31
February	760	0	0	0	28
March	914	0	0	0	31
April	885	0	0	0	30
May	914	0	0	0	31
June	885	0	0	0	30
July	914	0	0	0	31
August	914	0	0	0	31
September	885	0	0	0	30
October	914	0	0	0	31
November	885	0	0	0	30
December	914	0	0	0	31
TOTAL	10698		0		

Submitted Electronically