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 # 35203
Name: Kansas Crude Investments LLC
Address 1: 1593 220TH AVE
Address 2:
City: HAYS State: KS Zip: 67601 + 9306
Contact Person: Trevor C
Phone: (785) 656-0551
Lease Name: SKOLOUT
Well Number: #2 SWD

API No.: 15-153-20793-00-01
Permit No: D32406.0
Reporting Year: 2023
(January 1 to December 31)

____ - SW - SE - SE Sec. 23 Twp. 1 S. R. 35 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
990 feet from ☑ E / ☐ W Line of Section
County: Rawlins

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: 100 psi Injection Zone: WHITEHORSE
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	1545				26
February	975				28
March	1975				30
April	1975				30
May	1975				30
June	1975				30
July	1925				29
August	1950				30
September	1975				30
October	2000				31
November	850				12
December	1850				29
TOTAL	20970		0		

Submitted Electronically