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 # 33497
Name: Finfrock, Michael F. dba Rocky Road Oil Company
Address 1: 2189 45TH ST
Address 2:
City: BRONSON State: KS Zip: 66716 + 9117
Contact Person: Ron Cunningham
Phone: (620) 939-4360
Lease Name: AUDREY COLLINS
Well Number: W 36

API No.: 15-011-21928-00-00
Permit No: E14355.12
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NW - NW Sec. 25 Twp. 24 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4374 feet from ☐ N / ☑ S Line of Section
5017 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 400 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 100 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	155	150	0	0	31
February	140	150	0	0	28
March	155	150	0	0	31
April	150	150	0	0	30
May	155	150	0	0	31
June	150	150	0	0	30
July	155	150	0	0	31
August	155	150	0	0	31
September	150	150	0	0	30
October	155	150	0	0	31
November	150	150	0	0	30
December	155	150	0	0	31
TOTAL	1825		0		

Submitted Electronically