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 # 33856
Name: White Exploration, Inc.
Address 1: PO BOX 780425
Address 2:
City: WICHITA State: KS Zip: 67278 + 0425
Contact Person: Kenneth White
Phone: (316) 682-6300
Lease Name: CIRCLE 8
Well Number: 3-18

API No.: 15-187-21086-00-02
Permit No: D30087.0
Reporting Year: 2023
(January 1 to December 31)

W2 - SW - SE - SW Sec. 18 Twp. 28 S. R. 40 ☐ E ☑ W
(Q/Q/Q/Q)
358 feet from ☐ N / ☑ S Line of Section
1435 feet from ☐ E / ☑ W Line of Section
County: Stanton

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: Cedar Hills
Maximum Authorized Injection Rate: 500 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	0	0	0	0	0
February	0	0	0	0	0
March	637	-10	0	0	7
April	624	-5	0	0	8
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	2349	-10	0	0	27
December	1880	-5	0	0	20
TOTAL	5490		0		

Submitted Electronically