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 # 35180
Name: Kirkpatrick Properties LLC
Address 1: 14 NE 100 AVE
Address 2:
City: ELLINWOOD State: KS Zip: 67526 + 9077
Contact Person: Richard Kirkpatrick
Phone: (620) 791-7709
Lease Name: KEELER
Well Number: 1

API No.: 15-185-21815-00-01
Permit No: E25592.1
Reporting Year: 2024
(January 1 to December 31)

____ - SW - NE - NW Sec. 18 Twp. 21 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
4396 feet from ☐ N / ☑ S Line of Section
3769 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: 1000 psi Injection Zone: ARBUCKLE,LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 65 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	30				15
February	46				23
March	65				31
April	64				30
May	64				31
June	38				19
July	62				31
August	30				19
September	60				30
October	65				31
November	63				30
December	41				31
TOTAL	628		0		

Submitted Electronically