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 # 4767
Name: Ritchie Exploration, Inc.
Address 1: 8100 E 22ND ST N # 700
Address 2: PO BOX 783188
City: WICHITA State: KS Zip: 67278 + 3188
Contact Person: Peter Fiorini
Phone: (316) 691-9500
Lease Name: ANDERSON
Well Number: 14

API No.: 15-163-23557-00-01
Permit No: D28820.0
Reporting Year: 2024
(January 1 to December 31)

____ - ____ - N2 - NE Sec. 18 Twp. 10 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
4592 feet from ☐ N / ☑ S Line of Section
1385 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: ARBUCKLE
Maximum Authorized Injection Rate: 3500 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	16840	0	0	0	31
February	34367	0	0	0	28
March	37434	0	0	0	31
April	34455	0	0	0	30
May	38344	0	0	0	31
June	34455	0	0	0	30
July	36576	0	0	0	31
August	38344	0	0	0	31
September	37107	0	0	0	30
October	38344	0	0	0	31
November	36806	0	0	0	30
December	38344	0	0	0	31
TOTAL	421416		0		

Submitted Electronically