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: ADEE
Well Number: 2

API No.: 15-147-20371-00-01
Permit No: D28774.0
Reporting Year: 2024
*(January 1 to December 31)*

____ - NW - NW - NW Sec. 30 Twp. 4 S. R. 19 ☐ E ☑ W
*(Q/Q/Q/Q)*
4951 feet from ☐ N / ☑ S Line of Section
4828 feet from ☑ E / ☐ W Line of Section
County: Phillips

**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: 250 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 | 2964 | 0 | 0 | 0 | 31 |
| February | 3581 | 0 | 0 | 0 | 28 |
| March | 3828 | 0 | 0 | 0 | 31 |
| April | 3704 | 0 | 0 | 0 | 30 |
| May | 3828 | 0 | 0 | 0 | 31 |
| June | 3704 | 0 | 0 | 0 | 30 |
| July | 3828 | 0 | 0 | 0 | 31 |
| August | 3828 | 0 | 0 | 0 | 31 |
| September | 3704 | 0 | 0 | 0 | 30 |
| October | 3828 | 0 | 0 | 0 | 31 |
| November | 3704 | 0 | 0 | 0 | 30 |
| December | 3828 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 44329 | | 0 | | |

Submitted Electronically