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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: ( 918 ) 492-9797
Lease Name: RINGWALD
Well Number: 2

API No.: 15-159-21470-00-01
Permit No: D21685.0
Reporting Year: 2024
*(January 1 to December 31)*

____ - ____ - W2 - NE Sec. 32 Twp. 19 S. R. 10 ☐ E ☑ W
*(Q/Q/Q/Q)*
3961 feet from ☐ N / ☑ S Line of Section
2015 feet from ☑ E / ☐ W Line of Section
County: Rice

**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: 100 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 4000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 48871 | 0 | 0 | 0 | 31 |
| February | 85724 | 0 | 0 | 0 | 29 |
| March | 89702 | 0 | 0 | 0 | 31 |
| April | 88638 | 0 | 0 | 0 | 30 |
| May | 91729 | 0 | 0 | 0 | 31 |
| June | 85721 | 0 | 0 | 0 | 30 |
| July | 91664 | 0 | 0 | 0 | 31 |
| August | 85911 | 0 | 0 | 0 | 31 |
| September | 88980 | 0 | 0 | 0 | 30 |
| October | 91750 | 0 | 0 | 0 | 31 |
| November | 88670 | 0 | 0 | 0 | 30 |
| December | 91631 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 1028991 | | 0 | | |

Submitted Electronically