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 # 9855
Name: Grand Mesa Operating Company
Address 1: 1700 N WATERFRONT PKWY BLDG 600
Address 2:
City: WICHITA State: KS Zip: 67206 + 5514
Contact Person: Ron Fowler
Phone: (316) 265-3000
Lease Name: DICKMAN
Well Number: 4

API No.: 15-135-19063-00-00
Permit No: E10347.1
Reporting Year: 2024
(January 1 to December 31)

____ - SW - NW - NE Sec. 17 Twp. 17 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
4597 feet from ☐ N / ☑ S Line of Section
2076 feet from ☑ E / ☐ W Line of Section
County: Ness

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: 600 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1500 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	20706	0	0	0	31
February	20463	0	0	0	28
March	23797	0	0	0	31
April	24489	0	0	0	30
May	22561	0	0	0	31
June	24026	0	0	0	30
July	22469	0	0	0	31
August	21228	0	0	0	31
September	27392	0	0	0	30
October	27341	0	0	0	31
November	26027	0	0	0	30
December	24051	0	0	0	31
TOTAL	284550		0		

Submitted Electronically