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 # 30604
Name: Raydon Exploration, Inc.
Address 1: 1601 NW EXPRESSWAY, STE 1300
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73118 + 1462
Contact Person: Myron Heston
Phone: (620) 624-0156
Lease Name: MCBRIDE
Well Number: 1-23

API No.: 15-175-21910-00-01
Permit No: E31423.1
Reporting Year: 2024
(January 1 to December 31)

____ - SW - SE - NE Sec. 23 Twp. 32 S. R. 32 ☐ E ☑ W
(Q/Q/Q/Q)
2961 feet from ☐ N / ☑ S Line of Section
990 feet from ☑ E / ☐ W Line of Section
County: Seward

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: 200 psi Injection Zone: LANSING
Maximum Authorized Injection Rate: 500 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	835	0			6
February	696	0			5
March	835	0			6
April	696	0			5
May	835	0			6
June	696	0			5
July	835	0			6
August	835	0			6
September	696	0			5
October	835	0			6
November	696	0			5
December	835	0			6
TOTAL	9325		0		

Submitted Electronically