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 # 30606
Name: Murfin Drilling Co., Inc.
Address 1: 250 N WATER STE 300
Address 2:
City: WICHITA State: KS Zip: 67202 + 1216
Contact Person: Michelle Howell
Phone: (316) 267-3241
Lease Name: KASTRUP A
Well Number: 6

API No.: 15-167-22636-00-02
Permit No: E06101.4
Reporting Year: 2024
(January 1 to December 31)

____ - NE - SW - NW Sec. 15 Twp. 15 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
3630 feet from ☐ N / ☑ S Line of Section
4290 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 1000 psi Injection Zone: LKC
Maximum Authorized Injection Rate: 1000 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	8165	200	0	0	21
February	7301	400	0	0	29
March	5276	400	0	0	31
April	5138	400	0	0	30
May	4563	400	0	0	31
June	4579	150	0	0	30
July	4398	325	0	0	31
August	4703	400	0	0	31
September	4291	400	0	0	30
October	4539	400	0	0	31
November	3546	480	0	0	30
December	4542	460	0	0	31
TOTAL	61041		0		

Submitted Electronically