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 # 33005
Name: Randon Production Company Inc.
Address 1: 2863 SUNFLOWER
Address 2:
City: MARION State: KS Zip: 66861 + 9479
Contact Person: KATHY SVITAK
Phone: (620) 924-5774
Lease Name: G SMITH
Well Number: 1

API No.: 15-041-20100-00-02
Permit No: D30986.0
Reporting Year: 2024
(January 1 to December 31)

____ - SW - SE - NW Sec. 23 Twp. 16 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
2828 feet from ☐ N / ☑ S Line of Section
3718 feet from ☑ E / ☐ W Line of Section
County: Dickinson

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: HUNTON
Maximum Authorized Injection Rate: 4000 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically