

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**ANNUAL REPORT OF PRESSURE MONITORING,
FLUID INJECTION AND ENHANCED RECOVERY**

Form U3C
June 2015

Form must be Typed
Form must be completed
on a per well basis

Complete all blanks - add pages if needed. Copy to be retained for five (5) years after filing date.

OPERATOR: License # 34971

Name: Eastern Kansas Operating LLC

Address 1: 9532 E Riggs Rd

Address 2: _____

City: Sun Lakes State: AZ Zip: 85248 + _____

Contact Person: LaDawn Ferrell

Phone: (620) 672-9700

Lease Name: Someday

Well Number: 12

API No.: 15-121-27477-00-01

Permit No.: D27702.0

Reporting Year: 2016

(January 1 to December 31)

NE NW SW NE Sec. 12 Twp. 16 S. R. 24 E W
(quadra)

3920 feet from N / S Line of Section

2100 feet from E / W Line of Section

County: Miami

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)

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FEB 21 2017

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II. Well Data:

Maximum Authorized Injection Pressure: 125 psi Injection Zone: Arbuckle

Maximum Authorized Injection Rate: 8000 barrels per day

Total Number of Enhanced Recovery Injection Wells Covered by this Permit: _____ (Include TAs)

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	1600	0	0	0	15
	June	17000	0	0	0	30
	July	31000	0	0	0	31
	August	45000	0	0	0	31
	September	43000	0	0	0	30
	October	55000	0	0	0	31
	November	60000	0	0	0	30
	December	57000	0	0	0	31
	TOTAL	309600		0		