

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 # 34798
Name: Viking Production LLC
Address 1: 1432 Nighthawk Rd.
Address 2: _____
City: Yates Center State: KS Zip: 66783 + _____
Contact Person: Bert Carlson
Phone: (620) 485-6064
Lease Name: Taraba
Well Number: 1-D

API No.: 15-035-23626-00-00
Permit No: D24557.0
Reporting Year: 2016
(January 1 to December 31)
NE - SW - SW - NE Sec. 24 Twp. 33 S. R. 6 E W
(or or or) 3135 feet from N / S Line of Section
2280 feet from E / W Line of Section
County: Cowley

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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II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: GRANIT WASH
Maximum Authorized Injection Rate: 800 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	1600	0	0		28
February	1600	0	0		28
March	1600	0	0		28
April	0	0	0		0
May	0	0	0		0
June	0	0	0		0
July	0	0	0		0
August	0	0	0		0
September	0	0	0		0
October	0	0	0		0
November	0	0	0		0
December	0	0	0		0
TOTAL	4800		0		