1351170

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 # 6785
Name: Schulein Company LLC
Address 1: PO BOX 460972
Address 2:
City: DENVER State: CO Zip: 80246 + 0972
Contact Person: NANCY SCHULEIN
Phone: ( 303 ) 839-5495
Lease Name: HERRMANN
Well Number: 9-9

API No.: 15-083-21249-00-00
Permit No: D24714.0
Reporting Year: 2016
*(January 1 to December 31)*

SE - SE - NW - SE Sec. 9 Twp. 24 S. R. 22 ☐ E ☑ W
*(Q/Q/Q/Q)*
1550 feet from ☐ N / ☑ S Line of Section
1410 feet from ☑ E / ☐ W Line of Section
County: Hodgeman

**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: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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 | 13485 | 0 | 0 | | 31 |
| February | 12124 | 0 | 0 | | 29 |
| March | 13330 | 0 | 0 | | 31 |
| April | 13050 | 0 | 0 | | 30 |
| May | 13485 | 0 | 0 | | 31 |
| June | 12900 | 0 | 0 | | 30 |
| July | 13330 | 0 | 0 | | 31 |
| August | 12180 | 0 | 0 | | 31 |
| September | 12180 | 0 | 0 | | 30 |
| October | 13330 | 0 | 0 | | 31 |
| November | 13026 | 0 | 0 | | 30 |
| December | 15197 | 0 | 0 | | 31 |
| ***TOTAL*** | 157617 | | 0 | | |

Submitted Electronically