1281763

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 # 5003
Name: McCoy Petroleum Corporation
Address 1: 9342 E CENTRAL
Address 2:
City: WICHITA State: KS Zip: 67206 + 2573
Contact Person: Brent Reinhardt
Phone: (316) 636-2737
Lease Name: THRASHER ESTATE A - EOR
Well Number: 3-1

API No.: 15-109-20691-00-01
Permit No: E30171.4
Reporting Year: 2015
(January 1 to December 31)

____ - SW - NW - NW Sec. 1 Twp. 11 S. R. 34 ☐ E ☑ W
(Q/Q/Q/Q)
2283 feet from ☐ N / ☑ S Line of Section
5044 feet from ☑ E / ☐ W Line of Section
County: Logan

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: 1200 psi Injection Zone: Lkc
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	10478	0	0		31
February	9464	0	0		28
March	10478	0	0		31
April	10140	0	0		30
May	10478	0	0		31
June	10140	0	0		30
July	10478	0	0		31
August	10478	0	0		31
September	10140	0	0		30
October	10478	0	0		31
November	10140	0	0		30
December	10478	0	0		31
TOTAL	123370		0		

Submitted Electronically