1283924

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 # 5810
Name: Eickbush Production Co. LLC dba ECCO
Address 1: 306 N MAIN
Address 2: PO BOX 1025
City: MCPHERSON State: KS Zip: 67460 + __ __ __ __
Contact Person: Robert Eickbush
Phone: (620) 241-6350
Lease Name: BISHOP
Well Number: 3

API No.: 15-113-30031-00-02
Permit No: E19021.4
Reporting Year: 2015
(January 1 to December 31)

____ - ____ - ____ - NW Sec. 35 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
4680 feet from ☐ N / ☑ S Line of Section
2970 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 10 psi Injection Zone: MISSISSIPPI
Maximum Authorized Injection Rate: 1900 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	20917	0	0		31
February	18898	0	0		28
March	20920	0	0		31
April	20242	0	0		30
May	20915	0	0		31
June	20241	0	0		30
July	20919	0	0		31
August	20920	0	0		31
September	20245	0	0		30
October	20924	0	0		31
November	20243	0	0		30
December	20926	0	0		31
TOTAL	246310		0		

Submitted Electronically