1284346

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 # 5091
Name: Howell Oil Company, Inc.
Address 1: 2400 RIVERBIRCH RD
Address 2:
City: HUTCHINSON State: KS Zip: 67502 + 9280
Contact Person: Sreven Howell
Phone: (620) 664-5320
Lease Name: PIZINGER
Well Number: 1

API No.: 15-079-20389-00-01
Permit No: E26100.1
Reporting Year: 2015
(January 1 to December 31)

____ - SE - SW - NW Sec. 18 Twp. 23 S. R. 3 ☐ E ☑ W
(Q/Q/Q/Q)
3074 feet from ☐ N / ☑ S Line of Section
4353 feet from ☑ E / ☐ W Line of Section
County: Harvey

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 3000 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	46500	0	0		31
February	42000	0	0		28
March	46500	0	0		31
April	45000	0	0		30
May	46100	0	0		31
June	44600	0	0		30
July	46500	0	0		31
August	46300	0	0		31
September	44700	0	0		30
October	46500	0	0		31
November	45000	0	0		30
December	46000	0	0		31
TOTAL	545700		0		

Submitted Electronically