1293476

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 # 31767
Name: Seymour Oil Co., Inc.
Address 1: 205 E BLAINE ST
Address 2:
City: LATHAM State: KS Zip: 67072 + __ __ __ __
Contact Person: Rita Bolejack
Phone: (620) 965-2025
Lease Name: CREWS (HEIRS)
Well Number: WP-6

API No.: 15-019-26320-00-01
Permit No: E29026.3
Reporting Year: 2015
(January 1 to December 31)

SE - SW - NE - NW Sec. 17 Twp. 32 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4071 feet from ☐ N / ☑ S Line of Section
3485 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 350 psi Injection Zone: Layton
Maximum Authorized Injection Rate: 350 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	100	280	0		31
February	95	250	0		28
March	80	275	0		30
April	85	280	0		30
May	100	285	0		31
June	100	275	0		30
July	85	270	0		31
August	100	275	0		30
September	100	285	0		30
October	90	285	0		31
November	80	280	0		30
December	100	280	0		31
TOTAL	1115		0		

Submitted Electronically