1295608

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 # 4448
Name: Perkins Oil Enterprises, Inc.
Address 1: PO BOX 707
Address 2:
City: HOWARD State: KS Zip: 67349 + 0707
Contact Person: JAMES R. PERKINS
Phone: (620) 374-2133
Lease Name: MULLENDORE
Well Number: BP 5

API No.: 15-049-20216-00-01
Permit No: E27937.3
Reporting Year: 2015
(January 1 to December 31)

SW - SW - SE - NW Sec. 3 Twp. 30 S. R. 9 ☑ E ☐ W
(Q/Q/Q/Q)
2931 feet from ☐ N / ☑ S Line of Section
3673 feet from ☑ E / ☐ W Line of Section
County: Elk

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: 300 psi Injection Zone: KANSAS CITY LIME
Maximum Authorized Injection Rate: 200 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	2650	100	0		31
February	2650	100	0		28
March	2650	100	0		31
April	2650	100	0		30
May	2460	100	0		31
June	2430	100	0		30
July	2230	100	0		31
August	2260	100	0		31
September	436	100	0		30
October	658	100	0		31
November	3851	100	0		30
December	2597	100	0		31
TOTAL	27522		0		

Submitted Electronically