



## 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 # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Lease Name: \_\_\_\_\_  
Well Number: \_\_\_\_\_

API No.: \_\_\_\_\_  
Permit No.: \_\_\_\_\_  
Reporting Year: \_\_\_\_\_  
(January 1 to December 31)  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  E  W  
(a/a/a/a)  
\_\_\_\_\_ feet from  N /  S Line of Section  
\_\_\_\_\_ feet from  E /  W Line of Section  
County: \_\_\_\_\_

### 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: \_\_\_\_\_ psi Injection Zone: \_\_\_\_\_  
Maximum Authorized Injection Rate: \_\_\_\_\_ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	<b>TOTAL</b>	_____	_____	_____	_____	_____

S3-T23S-R19E

3 oil or gas wells were selected:

LEASE/WELL	API NUMBER	WELL TYPE	INFO
Minckley 'A' W-5	15-003-21162	EOR	<a href="#">display</a>
Minckley B W 5	15-003-21162-0001	EOR	<a href="#">display</a>
Minckley 'B' W-5	15-003-31162-0001	EOR	<a href="#">display</a>

Close

### OIL or GAS WELL

API: [15-003-31162-0001](#)  
Lease: Minckley 'B'  
Well: W-5  
Original Operator: Gary C. Splane  
Current Operator: Gary C. Splane  
Field: COLONY-WELDA  
Location: T23S R19E Sec. 3  
SW SE NE SW  
1320 North, 3080 West  
from SE corner  
Longitude (NAD27): -95.3095474  
Latitude (NAD27): 38.0706147  
County: Anderson  
Permit Date:  
Spud Date:  
Completion Date:  
Plugging Date:  
Well Type: EOR  
Status: Authorized Injection Well  
Total Depth: 775  
Elevation:  
Producing Formation:  
IP Oil (bbl):  
IP Water (bbl):  
IP Gas (mcf):

### Links:

- [Full KGS Database Entry](#)