1304703

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 # 34353
Name: Multiplex Resources, Inc.
Address 1: 3262 WESTHEIMER RD. #519
Address 2:
City: HOUSTON State: TX Zip: 77098 + 1002
Contact Person: Brandon Guiles
Phone: (281) 424-3242
Lease Name: DALE COX
Well Number: TC-3

API No.: 15-133-24126-00-01
Permit No: E31158.1
Reporting Year: 2015
(January 1 to December 31)

SE - NE - SE - SW Sec. 25 Twp. 28 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
3690 feet from ☑ N / ☐ S Line of Section
465 feet from ☑ E / ☐ W Line of Section
County: Neosho

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: NA mg/l Specific Gravity: NA Additives: NA
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 400 psi Injection Zone: Cattleman
Maximum Authorized Injection Rate: 100 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	30	30	0		31
February	30	30	0		28
March	30	30	0		31
April	30	30	0		30
May	30	30	0		31
June	30	30	0		30
July	30	30	0		31
August	30	30	0		31
September	30	30	0		30
October	30	30	0		31
November	30	30	0		30
December	30	30	0		31
TOTAL	360		0		

Submitted Electronically