1328923

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 # 32920
Name: W. R. Williams, Inc.
Address 1: PO BOX 15163
Address 2:
City: AMARILLO State: TX Zip: 79105 + 5163
Contact Person: Rob Williams
Phone: (806) 374-4555
Lease Name: PRICKETT
Well Number: 3

API No.: 15-075-20841-00-00
Permit No: D30251.0
Reporting Year: 2016
(January 1 to December 31)

____ - ____ - E2 - SE Sec. 4 Twp. 22 S. R. 40 ☐ E ☑ W
(Q/Q/Q/Q)
1287 feet from ☐ N / ☑ S Line of Section
652 feet from ☑ E / ☐ W Line of Section
County: Hamilton

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: 275 psi Injection Zone: WHITEHORSE,CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	407	0	0		31
February	349	0	0		28
March	413	0	0		31
April	396	0	0		30
May	405	0	0		31
June	399	0	0		30
July	407	0	0		31
August	412	0	0		31
September	398	0	0		30
October	398	0	0		31
November	395	0	0		30
December	325	0	0		31
TOTAL	4704		0		

Submitted Electronically