1344331

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 # 31448
Name: Everhart, Lawrence D. dba E & E Oil
Address 1: 1823 27TH AVE
Address 2:
City: CANTON State: KS Zip: 67428 + 0024
Contact Person: L D Everhart
Phone: (620) 628-4858
Lease Name: STATE C
Well Number: 2

API No.: 15-113-01624-00-01
Permit No: D05319.0
Reporting Year: 2016
(January 1 to December 31)

____ - SE - NE - SE Sec. 21 Twp. 18 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
1705 feet from ☐ N / ☑ S Line of Section
623 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 50 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 6000 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	29450	0	0		31
February	27550	0	0		29
March	29450	0	0		31
April	28500	0	0		30
May	29450	0	0		31
June	28500	0	0		30
July	29450	0	0		31
August	29450	0	0		31
September	28500	0	0		30
October	29450	0	0		31
November	28500	0	0		30
December	29450	0	0		31
TOTAL	347700		0		

Submitted Electronically