1344959

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 # 32198
Name: PetroSantander (USA) Inc.
Address 1: 6363 WOODWAY DR STE350
Address 2:
City: HOUSTON State: TX Zip: 77057 + 1798
Contact Person: William Aspinwall
Phone: (713) 784-8700
Lease Name: SCOTT
Well Number: 4-6

API No.: 15-055-20880-00-01
Permit No: D26271.0
Reporting Year: 2016
(January 1 to December 31)

____ - SW - NW - NW Sec. 4 Twp. 23 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
2258 feet from ☐ N / ☑ S Line of Section
4996 feet from ☑ E / ☐ W Line of Section
County: Finney

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: 0 psi Injection Zone: Glorietta
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	1364	0	0		31
February	1276	0	0		29
March	1488	0	0		31
April	1590	0	0		30
May	1550	0	0		31
June	1470	0	0		30
July	1612	0	0		31
August	1860	0	0		31
September	1590	0	0		30
October	1426	0	0		31
November	1320	0	0		30
December	1550	0	0		31
TOTAL	18096		0		

Submitted Electronically