1353903

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 # 34888
Name: American Oil LLC
Address 1: 1200 MAIN SUITE 410
Address 2:
City: HAYS State: KS Zip: 67601 + __ __ __ __
Contact Person: Zach Patterson
Phone: (785) 259-3717
Lease Name: PEARL CRESS
Well Number: 4

API No.: 15-051-19194-00-02
Permit No: D27012.0
Reporting Year: 2016
(January 1 to December 31)

SE - SE - NW - SE Sec. 13 Twp. 11 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
1973 feet from ☐ N / ☑ S Line of Section
1759 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 750 psi Injection Zone: TARKIO
Maximum Authorized Injection Rate: 4000 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	0		0		
February	0		0		
March	320	0	0		4
April	200	0	0		2
May	0		0		
June	0		0		
July	80	0	0		1
August	160	0	0		2
September	80	0	0		1
October	0		0		
November	0		0		
December	0		0		
TOTAL	840		0		

Submitted Electronically