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 # 35116
Name: SM Oil & Gas, Inc.
Address 1: P O BOX 189
Address 2:
City: SKIATOOK State: OK Zip: 74070 + 0189
Contact Person: Stan Miller, Sr.
Phone: (918) 629-2151
Lease Name: CAPPS
Well Number: JBD-05/4

API No.: 15-019-26694-00-01
Permit No: E28895.1
Reporting Year: 2017
(January 1 to December 31)

NW - SE - SW - SW Sec. 5 Twp. 34 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
578 feet from ☐ N / ☑ S Line of Section
4547 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 250 psi Injection Zone: WAYSIDE
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	6200	170	0		31
February	5400	200	0		27
March	6200	195	0		31
April	6000	180	0		30
May	6200	190	0		31
June	6000	200	0		30
July	6200	200	0		31
August	6200	200	0		31
September	6000	160	0		30
October	6200	200	0		31
November	6000	175	0		30
December	6200	170	0		31
TOTAL	72800		0		

Submitted Electronically