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 # 5091
Name: Howell Oil Company, Inc.
Address 1: 2400 RIVERBIRCH RD
Address 2:
City: HUTCHINSON State: KS Zip: 67502 + 9280
Contact Person: Larry Ressler
Phone: (620) 664-5320
Lease Name: HOWELL
Well Number: SWDW

API No.: 15-155-21726-00-00
Permit No: D32193.0
Reporting Year: 2017
(January 1 to December 31)

____ - N2 - NE - NW Sec. 24 Twp. 23 S. R. 4 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☑ N / ☐ S Line of Section
1980 feet from ☐ E / ☑ W Line of Section
County: Reno

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: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 10000 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	108500	0	0		31
February	98000	0	0		28
March	108000	0	0		31
April	105000	0	0		30
May	108200	0	0		31
June	104800	0	0		30
July	108500	0	0		31
August	108100	0	0		31
September	105000	0	0		30
October	108500	0	0		31
November	105000	0	0		30
December	108500	0	0		31
TOTAL	1276100		0		

Submitted Electronically