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: SABIN B
Well Number: 9

API No.: 15-155-21414-00-01
Permit No: E27831.1
Reporting Year: 2017
*(January 1 to December 31)*

____ - NW - NE - NW Sec. 13 Twp. 23 S. R. 4 ☐ E ☑ W
*(Q/Q/Q/Q)*
4730 feet from ☐ N / ☑ S Line of Section
3689 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: 0 psi Injection Zone: MISSISSIPPI
Maximum Authorized Injection Rate: 2000 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 | 37200 | 0 | 0 | | 31 |
| February | 36000 | 0 | 0 | | 28 |
| March | 37000 | 0 | 0 | | 31 |
| April | 36000 | 0 | 0 | | 30 |
| May | 37200 | 0 | 0 | | 31 |
| June | 36000 | 0 | 0 | | 30 |
| July | 37200 | 0 | 0 | | 31 |
| August | 37200 | 0 | 0 | | 31 |
| September | 36000 | 0 | 0 | | 30 |
| October | 37200 | 0 | 0 | | 31 |
| November | 36000 | 0 | 0 | | 30 |
| December | 37200 | 0 | 0 | | 31 |
| ***TOTAL*** | 440200 | | 0 | | |

Submitted Electronically