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 # 5004
Name: Vincent Oil Corporation
Address 1: 200 W DOUGLAS AVE #725
Address 2:
City: WICHITA State: KS Zip: 67202 + 3013
Contact Person: Bryan Hills
Phone: (316) 262-3573
Lease Name: STEELE TRUST
Well Number: 2-28 SWDW

API No.: 15-057-20586-00-02
Permit No: D30140.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - W2 - W2 Sec. 28 Twp. 27 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
4260 feet from ☐ N / ☑ S Line of Section
2348 feet from ☑ E / ☐ W Line of Section
County: Ford

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: 1000 psi Injection Zone: Cedar Hills
Maximum Authorized Injection Rate: 1000 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	10230	0	0		31
February	9240	0	0		28
March	10230	0	0		31
April	9900	0	0		30
May	10230	0	0		31
June	9900	0	0		30
July	10230	0	0		31
August	10230	0	0		31
September	9900	0	0		30
October	10230	0	0		31
November	9900	0	0		30
December	10230	0	0		31
TOTAL	120450		0		

Submitted Electronically