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: WHITE
Well Number: 1-6

API No.: 15-057-20669-00-00
Permit No: D30625.0
Reporting Year: 2017
(January 1 to December 31)

SW - NE - NE - SW Sec. 6 Twp. 29 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
2116 feet from ☐ N / ☑ S Line of Section
3242 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: 500 psi Injection Zone: Mississippian
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	2170	0	0		31
February	1960	0	0		28
March	2170	0	0		31
April	2100	0	0		30
May	2170	0	0		31
June	2100	0	0		30
July	2170	0	0		31
August	2170	0	0		31
September	2100	0	0		30
October	2170	0	0		31
November	2100	0	0		30
December	2170	0	0		31
TOTAL	25550		0		

Submitted Electronically