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 # 30304
Name: Taylor, Michael dba M. J. T. Enterprises
Address 1: 37411 JOHN BROWN HWY
Address 2:
City: OSAWATOMIE State: KS Zip: 66064 + 5254
Contact Person: Mike Taylor
Phone: (913) 755-4265
Lease Name: DAVIS
Well Number: 5

API No.: 15-121-19256-00-01
Permit No: E20607.2
Reporting Year: 2017
(January 1 to December 31)

SE - NW - SW - SW Sec. 7 Twp. 18 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
921 feet from ☐ N / ☑ S Line of Section
4291 feet from ☑ E / ☐ W Line of Section
County: Miami

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: SQUIRREL
Maximum Authorized Injection Rate: 50 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	155	450	0		31
February	140	450	0		28
March	155	450	0		31
April	150	450	0		30
May	155	450	0		31
June	150	450	0		30
July	155	450	0		31
August	155	450	0		31
September	150	450	0		30
October	155	450	0		31
November	150	450	0		30
December	155	450	0		31
TOTAL	1825		0		

Submitted Electronically