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 # 3882
Name: Samuel Gary Jr. & Associates, Inc.
Address 1: 1515 WYNKOOP, STE 700
Address 2:
City: DENVER State: CO Zip: 80202 + __ __ __ __
Contact Person: STEPHANIE DECKER
Phone: (303) 831-4673
Lease Name: STUMPS B
Well Number: 2

API No.: 15-009-30819-00-01
Permit No: D23348.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NW - SW Sec. 3 Twp. 17 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
2359 feet from ☐ N / ☑ S Line of Section
5177 feet from ☑ E / ☐ W Line of Section
County: Barton

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: ARBUCKLE
Maximum Authorized Injection Rate: 2500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	19831	0	0		31
February	18508	0	0		28
March	20328	0	0		31
April	19560	0	0		30
May	20284	0	0		31
June	19680	0	0		30
July	20321	0	0		31
August	20577	0	0		31
September	20160	0	0		30
October	20874	0	0		31
November	20250	0	0		30
December	20925	0	0		31
TOTAL	241298		0		

Submitted Electronically