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 # 4656
Name: Davis Petroleum, Inc.
Address 1: 7 SW 26 AVE
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 6525
Contact Person: Susan Schneweis
Phone: (620) 793-3051
Lease Name: TILLOTSON
Well Number: 2

API No.: 15-101-20786-00-00
Permit No: D22103.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NE - NW Sec. 19 Twp. 16 S. R. 28 ☐ E ☑ W
(Q/Q/Q/Q)
4239 feet from ☐ N / ☑ S Line of Section
3628 feet from ☑ E / ☐ W Line of Section
County: Lane

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: 300 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	7440	0	0		31
February	6720	0	0		28
March	7440	0	0		31
April	7200	0	0		30
May	7440	0	0		31
June	7200	0	0		30
July	7440	0	0		31
August	7440	0	0		31
September	7200	0	0		30
October	7440	0	0		31
November	7200	0	0		30
December	7440	0	0		31
TOTAL	87600		0		

Submitted Electronically