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 # 32158
Name: H & B Petroleum Corp.
Address 1: PO BOX 1305
Address 2:
City: HUTCHINSON State: KS Zip: 67504 + __ __ __ __
Contact Person: Mike Hammersmith
Phone: (620) 259-6713
Lease Name: JOHN SPANIER B
Well Number: 1

API No.: 15-009-14515-00-01
Permit No: D31633.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SW - SW Sec. 12 Twp. 20 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
1020 feet from ☐ N / ☑ S Line of Section
4941 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: 3000 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	16641	-22	0		31
February	16424	-22	0		28
March	17490	-22	0		31
April	16926	-22	0		30
May	17552	-22	0		31
June	17085	-22	0		30
July	17763	-25	0		31
August	18439	-22	0		31
September	17895	-20	0		30
October	18491	-25	0		31
November	17865	-20	0		30
December	18619	-22	0		31
TOTAL	211190		0		

Submitted Electronically