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 # 35250
Name: Woodway Oil & Gas I, LLC
Address 1: 4900 WOODWAY DR. SUITE 625
Address 2:
City: HOUSTON State: TX Zip: 77056 + __ __ __ __
Contact Person: Lesli Baker
Phone: (713) 966-2500
Lease Name: STAMPER C
Well Number: 5

API No.: 15-163-23233-00-01
Permit No: D28148.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - NW - N2 Sec. 32 Twp. 8 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
5108 feet from ☐ N / ☑ S Line of Section
1995 feet from ☑ E / ☐ W Line of Section
County: Rooks

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: NA mg/l Specific Gravity: NA Additives: NA
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 200 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 5000 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	50995	0	0		31
February	46060	0	0		28
March	50995	0	0		31
April	49350	0	0		30
May	50995	0	0		31
June	49350	0	0		30
July	50995	0	0		31
August	50995	0	0		31
September	49350	0	0		30
October	50995	0	0		31
November	49350	0	0		30
December	50995	0	0		31
TOTAL	600425		0		

Submitted Electronically