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 # 3180
Name: Deutsch, Kent A. dba Deutsch Oil Company
Address 1: 8100 E 22ND ST N, BLDG 600
Address 2:
City: WICHITA State: KS Zip: 67226 + __ __ __ __
Contact Person: Kent Deutsch
Phone: (316) 681-3567
Lease Name: HUFFMAN SWD
Well Number: 1

API No.: 15-151-00170-00-02
Permit No: D18068.0
Reporting Year: 2017
(January 1 to December 31)

____ - NW - NW - NW Sec. 4 Twp. 27 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
4974 feet from ☐ N / ☑ S Line of Section
4970 feet from ☑ E / ☐ W Line of Section
County: Pratt

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: 20 psi Injection Zone: CEDAR HILLS
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	9300	125	0		31
February	7000	125	0		28
March	8525	125	0		31
April	8400	125	0		30
May	8900	125	0		31
June	7500	125	0		30
July	9145	125	0		31
August	9145	125	0		31
September	8850	125	0		30
October	8400	125	0		31
November	8700	125	0		30
December	8680	125	0		31
TOTAL	102545		0		

Submitted Electronically