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 # 5375
Name: Hillenburg Oil Co., a General Partnership
Address 1: 11600 S LYNN LANE RD
Address 2:
City: BROKEN ARROW State: OK Zip: 74011 + 4021
Contact Person: Andy Hillenburg
Phone: (918) 455-4444
Lease Name: REAMEY
Well Number: 36

API No.: 15-115-20661-00-00
Permit No: D25000.0
Reporting Year: 2017
(January 1 to December 31)

____ - SE - SE - NE Sec. 20 Twp. 21 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
3165 feet from ☐ N / ☑ S Line of Section
546 feet from ☑ E / ☐ W Line of Section
County: Marion

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: 12000 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	6355	0	0		31
February	5740	0	0		28
March	6355	0	0		31
April	6150	0	0		30
May	6355	0	0		31
June	6150	0	0		30
July	6355	0	0		31
August	6355	0	0		31
September	6150	0	0		30
October	6355	0	0		31
November	6150	0	0		30
December	6355	0	0		31
TOTAL	74825		0		

Submitted Electronically