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: ADAMS
Well Number: 119

API No.: 15-015-40386-00-01
Permit No: D13740.0
Reporting Year: 2017
*(January 1 to December 31)*

____ - NW - SE - SE Sec. 31 Twp. 25 S. R. 5 ☑ E ☐ W
*(Q/Q/Q/Q)*
682 feet from ☐ N / ☑ S Line of Section
752 feet from ☑ E / ☐ W Line of Section
County: Butler

**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: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 850 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 | 15004 | 0 | 0 | | 31 |
| February | 13552 | 0 | 0 | | 28 |
| March | 15004 | 0 | 0 | | 31 |
| April | 14520 | 0 | 0 | | 30 |
| May | 15004 | 0 | 0 | | 31 |
| June | 14520 | 0 | 0 | | 30 |
| July | 15004 | 0 | 0 | | 31 |
| August | 15004 | 0 | 0 | | 31 |
| September | 14520 | 0 | 0 | | 30 |
| October | 15004 | 0 | 0 | | 31 |
| November | 14520 | 0 | 0 | | 30 |
| December | 15004 | 0 | 0 | | 31 |
| ***TOTAL*** | 176660 | | 0 | | |

Submitted Electronically