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 # 30535
Name: Hartman Oil Co., Inc.
Address 1: 10500 E BERKELEY SQ PKWY STE 100
Address 2:
City: WICHITA State: KS Zip: 67206 + __ __ __ __
Contact Person: Catherine Hartman
Phone: ( 316 ) 636-2090
Lease Name: NORMAN-ADAM
Well Number: 2-4

API No.: 15-055-20250-00-02
Permit No: D19551.0
Reporting Year: 2017
*(January 1 to December 31)*

SE - SW - SW - NE Sec. 4 Twp. 22 S. R. 33 ☐ E ☑ W
*(Q/Q/Q/Q)*
647 feet from ☐ N / ☑ S Line of Section
1970 feet from ☑ E / ☐ W Line of Section
County: Finney

**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: KANSAS CITY
Maximum Authorized Injection Rate: 1000 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 | 12826 | 0 | 0 | | 31 |
| February | 11152 | 0 | 0 | | 28 |
| March | 13308 | 0 | 0 | | 31 |
| April | 17489 | 0 | 0 | | 30 |
| May | 18379 | 0 | 0 | | 31 |
| June | 15718 | 0 | 0 | | 30 |
| July | 17665 | 0 | 0 | | 31 |
| August | 17665 | 0 | 0 | | 31 |
| September | 14148 | 0 | 0 | | 30 |
| October | 16251 | 0 | 0 | | 31 |
| November | 14743 | 0 | 0 | | 30 |
| December | 17691 | 0 | 0 | | 31 |
| ***TOTAL*** | 187035 | | 0 | | |

Submitted Electronically