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 # 8914
Name: H & C Oil Operating Inc.
Address 1: PO BOX 86
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + 0086
Contact Person: Charles Ramsay
Phone: ( 785 ) 434-7434
Lease Name: HOBBS
Well Number: 1

API No.: 15-051-21747-00-01
Permit No: D23982.0
Reporting Year: 2017
*(January 1 to December 31)*

____ - NE - S2 - S2 Sec. 5 Twp. 15 S. R. 18 ☐ E ☑ W
*(Q/Q/Q/Q)*
3047 feet from ☐ N / ☑ S Line of Section
1392 feet from ☑ E / ☐ W Line of Section
County: Ellis

**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: 1500 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 | 20314 | 0 | 0 | | 31 |
| February | 18883 | 0 | 0 | | 28 |
| March | 20905 | 0 | 0 | | 31 |
| April | 20768 | 0 | 0 | | 30 |
| May | 21460 | 0 | 0 | | 31 |
| June | 20772 | 0 | 0 | | 30 |
| July | 21465 | 0 | 0 | | 31 |
| August | 31465 | 0 | 0 | | 31 |
| September | 20772 | 0 | 0 | | 30 |
| October | 20618 | 0 | 0 | | 31 |
| November | 22048 | 0 | 0 | | 30 |
| December | 20923 | 0 | 0 | | 31 |
| ***TOTAL*** | 260393 | | 0 | | |

Submitted Electronically