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 # 5042
Name: Edmiston Oil Company, Inc.
Address 1: 125 N MARKET STE 1420
Address 2:
City: WICHITA State: KS Zip: 67202 + 1714
Contact Person: JON CALLEN
Phone: (316) 265-5241
Lease Name: HOGE
Well Number: 2

API No.: 15-103-20110-00-01
Permit No: E27388.1
Reporting Year: 2017
(January 1 to December 31)

____ - NW - SW - NE Sec. 20 Twp. 8 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
3772 feet from ☐ N / ☑ S Line of Section
2445 feet from ☑ E / ☐ W Line of Section
County: Leavenworth

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: 900 psi Injection Zone: MCLOUTH SAND
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	31	0	0		31
February	28	0	0		28
March	31	0	0		31
April	30	0	0		30
May	31	0	0		31
June	30	0	0		30
July	31	0	0		31
August	31	0	0		31
September	30	0	0		30
October	31	0	0		31
November	30	0	0		30
December	31	0	0		31
TOTAL	365		0		

Submitted Electronically