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 # 33406
Name: Thomas Garner, Inc.
Address 1: 305 E 7TH
Address 2:
City: ST JOHN State: KS Zip: 67576 + 1652
Contact Person: Tom Garner
Phone: (620) 793-0766
Lease Name: WAYNE
Well Number: 5

API No.: 15-009-25092-00-01
Permit No: D30051.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - NW - NW Sec. 28 Twp. 17 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
4975 feet from ☐ N / ☑ S Line of Section
4415 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 4000 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	7200	0	0		31
February	7000	0	0		28
March	7500	0	0		31
April	7500	0	0		30
May	7300	0	0		31
June	7500	0	0		30
July	7700	0	0		31
August	7300	0	0		31
September	7500	0	0		30
October	7200	0	0		31
November	7200	0	0		30
December	7500	0	0		31
TOTAL	88400		0		

Submitted Electronically