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 # 34828
Name: CFMI, LLC
Address 1: 3845 S. 103RD E. AVE SUITE 101
Address 2:
City: TULSA State: OK Zip: 74146 + __ __ __ __
Contact Person: Cameron Long
Phone: (918) 877-5101
Lease Name: HELEN
Well Number: 1-26

API No.: 15-101-20939-00-02
Permit No: D24047.0
Reporting Year: 2017
(January 1 to December 31)

____ - SE - SE - NE Sec. 26 Twp. 16 S. R. 30 ☐ E ☑ W
(Q/Q/Q/Q)
3001 feet from ☐ N / ☑ S Line of Section
308 feet from ☑ E / ☐ W Line of Section
County: Lane

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: LANSING-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	7569	0	0		31
February	7262	0	0		28
March	7514	0	0		31
April	6849	0	0		30
May	7706	0	0		31
June	6823	0	0		30
July	7445	0	0		31
August	7379	0	0		31
September	7096	0	0		30
October	6628	0	0		31
November	7506	0	0		30
December	6772	0	0		31
TOTAL	86549		0		

Submitted Electronically