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 # 34888
Name: American Oil LLC
Address 1: 1200 MAIN SUITE 410
Address 2:
City: HAYS State: KS Zip: 67601 + __ __ __ __
Contact Person: Zach Patterson
Phone: (785) 259-3717
Lease Name: TOMASHECK
Well Number: 2-22

API No.: 15-163-24258-00-00
Permit No: D32060.0
Reporting Year: 2017
(January 1 to December 31)

SW - NW - NW - SW Sec. 22 Twp. 10 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
2070 feet from ☐ N / ☑ S Line of Section
130 feet from ☐ E / ☑ W Line of Section
County: Rooks

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: 100 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	41000	0	0		31
February	41000	0	0		28
March	41000	0	0		31
April	42000	0	0		30
May	42000	0	0		31
June	42000	0	0		30
July	42000	0	0		31
August	33600	0	0		31
September	40000	0	0		30
October	42000	0	0		31
November	42000	0	0		30
December	42000	0	0		31
TOTAL	490600		0		

Submitted Electronically