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 # 31448
Name: Everhart, Lawrence D. dba E & E Oil
Address 1: 1823 27TH AVE
Address 2:
City: CANTON State: KS Zip: 67428 + 0024
Contact Person: Lawrence D Everhart
Phone: (620) 628-4858
Lease Name: STUCKY-HOLLOWAY
Well Number: 5

API No.: 15-113-00609-00-01
Permit No: D06036.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - SW - NE Sec. 3 Twp. 18 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
3016 feet from ☐ N / ☑ S Line of Section
2476 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 50 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2500 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	47585	0	0		31
February	42980	0	0		28
March	47585	0	0		31
April	46050	0	0		30
May	47585	0	0		31
June	46050	0	0		30
July	47585	0	0		31
August	47585	0	0		31
September	46050	0	0		30
October	47585	0	0		31
November	46050	0	0		30
December	47585	0	0		31
TOTAL	560275		0		

Submitted Electronically