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 # 30104
Name: Cambron, Paul L.
Address 1: 118 N PENN
Address 2: PO BOX 384
City: NESS CITY State: KS Zip: 67560 + 1634
Contact Person: Paul Cambron
Phone: (785) 798-2282
Lease Name: BOSLEY 3-B
Well Number: 1

API No.: 15-101-21625-00-01
Permit No: D27796.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NE - NW Sec. 3 Twp. 19 S. R. 28 ☐ E ☑ W
(Q/Q/Q/Q)
4322 feet from ☐ N / ☑ S Line of Section
3595 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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	6400	0	0		30
February	8360	0	0		27
March	9280	0	0		30
April	9080	0	0		29
May	9760	0	0		30
June	8960	0	0		29
July	8240	0	0		30
August	8720	0	0		30
September	8040	0	0		29
October	9680	0	0		30
November	9800	0	0		29
December	8800	0	0		30
TOTAL	105120		0		

Submitted Electronically