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 # 34878
Name: Lawco Holdings, LLC
Address 1: 113 S MAIN
Address 2: PO BOX 425
City: BENTONVILLE State: AR Zip: 72712 + ___ ___ ___ ___
Contact Person: James R. Lawson
Phone: ( 479 ) 273-2670
Lease Name: FULSOM
Well Number: 1-8

API No.: 15-035-24505-00-01
Permit No: D31640.0
Reporting Year: 2017
*(January 1 to December 31)*

___ - N2 - SE - NE Sec. 8 Twp. 35 S. R. 7 ☑ E ☐ W
*(Q/Q/Q/Q)*
1650 feet from ☑ N / ☐ S Line of Section
660 feet from ☑ E / ☐ W Line of Section
County: Cowley

**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: 1000 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 35000 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 | 2567 | 0 | 0 | | 31 |
| February | 2257 | 0 | 0 | | 28 |
| March | 2508 | 0 | 0 | | 31 |
| April | 2984 | 0 | 0 | | 30 |
| May | 2963 | 0 | 0 | | 31 |
| June | 2862 | 0 | 0 | | 30 |
| July | 2911 | 0 | 0 | | 31 |
| August | 4551 | 0 | 0 | | 31 |
| September | 4405 | 0 | 0 | | 30 |
| October | 4148 | 0 | 0 | | 31 |
| November | 3940 | 0 | 0 | | 30 |
| December | 3291 | 0 | 0 | | 31 |
| ***TOTAL*** | 39387 | | 0 | | |

Submitted Electronically