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 # 33427
Name: Petroleum Production Corporation
Address 1: 2 S GOLD ST
Address 2:
City: PAOLA State: KS Zip: 66071 + 1403
Contact Person: Barbara Green
Phone: (913) 557-9639
Lease Name: HOWLIER
Well Number: 3

API No.: 15-121-23810-00-01
Permit No: E27608.1
Reporting Year: 2017
(January 1 to December 31)

SE - SW - SE - SW Sec. 11 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
165 feet from ☐ N / ☑ S Line of Section
3392 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 550 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 40 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	31	400	0		31
February	28	400	0		28
March	62	400	0		31
April	60	400	0		30
May	31	400	0		31
June	30	400	0		30
July	62	400	0		31
August	62	400	0		31
September	60	400	0		30
October	31	400	0		31
November	30	400	0		30
December	31	400	0		31
TOTAL	518		0		

Submitted Electronically