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 # 33809
Name: Belport Oil, Inc.
Address 1: 10830 E 45TH ST STE 206
Address 2:
City: TULSA State: OK Zip: 74146 + 3809
Contact Person: George Davenport
Phone: (918) 637-5476
Lease Name: JENNIE OWEN
Well Number: 4

API No.: 15-145-01008-00-01
Permit No: D26450.0
Reporting Year: 2017
(January 1 to December 31)

____ - SW - NE - NW Sec. 27 Twp. 22 S. R. 15 ☐ E ☑ W
(Q/Q/Q/Q)
4286 feet from ☐ N / ☑ S Line of Section
3744 feet from ☑ E / ☐ W Line of Section
County: Pawnee

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: 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	0		0		
February	0		0		
March	0		0		
April	0		0		
May	0		0		
June	0		0		
July	0		0		
August	0		0		
September	0		0		
October	0		0		
November	11250	0	0		10
December	28800	0	0		30
TOTAL	40050		0		

Submitted Electronically