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 # 30886
Name: Thomas, John R. dba Vamco Operations
Address 1: 265 AVENUE K
Address 2:
City: CHASE State: KS Zip: 67524 + 9440
Contact Person: John Thomas
Phone: (620) 938-2411
Lease Name: SARA SLEEPER
Well Number: 2

API No.: 15-185-20765-00-01
Permit No: D25528.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - SW - NE Sec. 4 Twp. 22 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
3691 feet from ☐ N / ☑ S Line of Section
1656 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: 4000 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	6075	0	0		31
February	13580	0	0		28
March	28055	0	0		31
April	28400	0	0		30
May	30380	0	0		31
June	22700	0	0		30
July	30380	0	0		31
August	28420	0	0		29
September	28400	0	0		30
October	30380	0	0		31
November	28400	0	0		30
December	27440	0	0		28
TOTAL	302610		0		

Submitted Electronically