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 # 35116
Name: SM Oil & Gas, Inc.
Address 1: P.O. BOX 189
Address 2:
City: SKIATOOK State: OK Zip: 74070 + 0189
Contact Person: Stan Miller, Sr.
Phone: (918) 629-2151
Lease Name: DAY
Well Number: 3

API No.: 15-019-23580-00-00
Permit No: D20987.0
Reporting Year: 2018
(January 1 to December 31)

____ - NW - SW - NE Sec. 19 Twp. 33 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
3451 feet from ☐ N / ☑ S Line of Section
2537 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 120 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 1000 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	875	0	0		7
February	3206	0	0		28
March	2253	0	0		15
April	0		0		0
May	3704	0	0		25
June	4706	0	0		30
July	4829	0	0		31
August	4875	0	0		31
September	4239	0	0		28
October	4730	0	0		31
November	4469	0	0		30
December	4553	0	0		31
TOTAL	42439		0		

Submitted Electronically