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 # 5259
Name: Mai Oil Operations, Inc.
Address 1: 8411 PRESTON RD STE 800
Address 2:
City: DALLAS State: TX Zip: 75225 + 5520
Contact Person: Brent Homeier
Phone: (214) 219-8883
Lease Name: SLIMMER 2
Well Number: 6

API No.: 15-051-26336-00-00
Permit No: D31553.0
Reporting Year: 2018
(January 1 to December 31)

____ - SW - NE - SW Sec. 12 Twp. 11 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
1650 feet from ☐ N / ☑ S Line of Section
3580 feet from ☑ E / ☐ W Line of Section
County: Ellis

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,GRANIT WASH
Maximum Authorized Injection Rate: 10000 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	35464	0	0		31
February	32032	0	0		28
March	35464	0	0		31
April	34320	0	0		30
May	35464	0	0		31
June	34320	0	0		30
July	35464	0	0		31
August	35464	0	0		31
September	34320	0	0		30
October	35464	0	0		31
November	34320	0	0		30
December	35464	0	0		31
TOTAL	417560		0		

Submitted Electronically