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 # 5004
Name: Vincent Oil Corporation
Address 1: 200 W DOUGLAS AVE #725
Address 2:
City: WICHITA State: KS Zip: 67202 + 3023
Contact Person: Bryan Hills
Phone: (316) 262-3573
Lease Name: DROSTE
Well Number: 1-10

API No.: 15-057-20923-00-00
Permit No: D31910.0
Reporting Year: 2018
(January 1 to December 31)

____ - NE - SE - NE Sec. 10 Twp. 28 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
1782 feet from ☑ N / ☐ S Line of Section
460 feet from ☑ E / ☐ W Line of Section
County: Ford

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: 250 psi Injection Zone: OSAGE,MISSISSIPPIAN,WARSAW
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	6572	0	0		31
February	5936	0	0		28
March	6572	0	0		31
April	6360	0	0		30
May	6572	0	0		31
June	6360	0	0		30
July	6572	0	0		31
August	6572	0	0		31
September	6360	0	0		30
October	6572	0	0		31
November	6360	0	0		30
December	6572	0	0		31
TOTAL	77380		0		

Submitted Electronically