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 # 35481
Name: McMillan, L.L.C.
Address 1: 2061 INDEPENDENCE RD.
Address 2:
City: SEDAN State: KS Zip: 67361 + 8853
Contact Person: John McMillan
Phone: (620) 725-5757
Lease Name: SANBORN 1
Well Number: 3

API No.: 15-019-19920-00-01
Permit No: E31534.1
Reporting Year: 2018
(January 1 to December 31)

NW - NE - SE - SW Sec. 26 Twp. 33 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
1103 feet from ☐ N / ☑ S Line of Section
3185 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: 300 psi Injection Zone: WAYSIDE
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	558	250	0	0	31
February	504	250	0	0	28
March	558	250	0	0	31
April	540	250	0	0	30
May	558	250	0	0	31
June	540	250	0	0	30
July	558	250	0	0	31
August	558	250	0	0	31
September	540	250	0	0	30
October	558	250	0	0	31
November	540	250	0	0	30
December	486	250	0	0	27
TOTAL	6498		0		

Submitted Electronically