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 # 33065
Name: Hoehn Oil LLC
Address 1: 40971 W 247TH
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 4047
Contact Person: Lesli Baker
Phone: ( 913 ) 908-5976
Lease Name: GILLESPIE
Well Number: 12

API No.: 15-091-22747-00-01
Permit No: E27447.7
Reporting Year: 2018
*(January 1 to December 31)*

NW - NE - SE - SW Sec. 31 Twp. 14 S. R. 22 ☑ E ☐ W
*(Q/Q/Q/Q)*
4199 feet from ☐ N / ☑ S Line of Section
3106 feet from ☑ E / ☐ W Line of Section
County: Johnson

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 300 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 30 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 | 306 | 250 | 0 | 0 | 31 |
| February | 274 | 250 | 0 | 0 | 28 |
| March | 304 | 250 | 0 | 0 | 31 |
| April | 297 | 250 | 0 | 0 | 30 |
| May | 303 | 250 | 0 | 0 | 31 |
| June | 291 | 250 | 0 | 0 | 30 |
| July | 301 | 250 | 0 | 0 | 31 |
| August | 304 | 250 | 0 | 0 | 31 |
| September | 293 | 250 | 0 | 0 | 30 |
| October | 304 | 250 | 0 | 0 | 31 |
| November | 296 | 250 | 0 | 0 | 30 |
| December | 309 | 250 | 0 | 0 | 31 |
| ***TOTAL*** | 3582 | | 0 | | |

Submitted Electronically