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 # 8653
Name: Petroleum Technologies, Inc.
Address 1: 801 W 47TH ST STE 412
Address 2:
City: KANSAS CITY State: MO Zip: 64112 + 1253
Contact Person: Alan Seaton
Phone: (816) 531-6904
Lease Name: HOOPER C
Well Number: 2

API No.: 15-185-21875-00-01
Permit No: D24442.0
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SE - NE Sec. 34 Twp. 21 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
2964 feet from ☐ N / ☑ S Line of Section
325 feet from ☑ E / ☐ W Line of Section
County: Stafford

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
Maximum Authorized Injection Rate: 3000 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	64604				31
February	58352				28
March	64604				31
April	62520				30
May	64604				31
June	62520				30
July	64604				31
August	58352				28
September	62520				30
October	64604				31
November	62520				30
December	64604				31
TOTAL	754408		0		

Submitted Electronically