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 # 35473
Name: Streamline Energy, LLC
Address 1: 906 N. MAIN
Address 2:
City: YATES CENTER State: KS Zip: 66783 + __ __ __ __
Contact Person: Lesli Baker
Phone: (785) 766-1278
Lease Name: MCCONNELL EAST
Well Number: A-1

API No.: 15-125-22008-00-01
Permit No: D20649.0
Reporting Year: 2018
(January 1 to December 31)

SE - SW - SW - NW Sec. 17 Twp. 34 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
412 feet from ☐ N / ☑ S Line of Section
2325 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: 400 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 500 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	25
June	0	0	0	0	30
July	0	0	0	0	31
August	0	0	0	0	31
September	48	200	0	0	30
October	49	200	0	0	31
November	0	0	0	0	30
December	0	0	0	0	31
TOTAL	97		0		

Submitted Electronically