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 # 34179
Name: Thomas M. Brown LLC
Address 1: PO BOX 250
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + 0250
Contact Person: Jake Brown
Phone: (785) 434-7141
Lease Name: DECHANT
Well Number: 2

API No.: 15-163-22001-00-02
Permit No: E26105.1
Reporting Year: 2018
(January 1 to December 31)

____ - S2 - NE - NE Sec. 23 Twp. 8 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
4242 feet from ☐ N / ☑ S Line of Section
797 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: LANSING-KANSAS CITY,TORONTO
Maximum Authorized Injection Rate: 150 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	4340	0	0	0	31
February	3920	0	0	0	28
March	4340	0	0	0	31
April	4200	0	0	0	30
May	4340	0	0	0	31
June	4200	0	0	0	30
July	4340	0	0	0	31
August	4340	0	0	0	31
September	4200	0	0	0	30
October	4340	0	0	0	31
November	4200	0	0	0	30
December	4340	0	0	0	31
TOTAL	51100		0		

Submitted Electronically