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 # 5920
Name: Bandy, Terry P. dba Te-Pe Oil & Gas
Address 1: PO BOX 522
Address 2:
City: CANTON State: KS Zip: 67428 + 0522
Contact Person: Terry P Bandy
Phone: ( 620 ) 628-4428
Lease Name: HANNAFORD
Well Number: 3 OWWO

API No.: 15-115-19296-00-01
Permit No: D31631.0
Reporting Year: 2018
*(January 1 to December 31)*

____ - SE - NW - NW Sec. 36 Twp. 21 S. R. 4 ☑ E ☐ W
*(Q/Q/Q/Q)*
4245 feet from ☐ N / ☑ S Line of Section
4273 feet from ☑ E / ☐ W Line of Section
County: Marion

**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: 5000 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 | 6448 | 0 | 0 | | 31 |
| February | 5824 | 0 | 0 | | 28 |
| March | 6448 | 0 | 0 | | 31 |
| April | 6240 | 0 | 0 | | 30 |
| May | 6448 | 0 | 0 | | 31 |
| June | 6240 | 0 | 0 | | 30 |
| July | 6448 | 0 | 0 | | 31 |
| August | 6448 | 0 | 0 | | 31 |
| September | 6240 | 0 | 0 | | 30 |
| October | 6448 | 0 | 0 | | 31 |
| November | 6240 | 0 | 0 | | 30 |
| December | 6448 | 0 | 0 | | 31 |
| ***TOTAL*** | 75920 | | 0 | | |

Submitted Electronically