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 # 34921
Name: C & W Oil, LLC
Address 1: 600 WHEELER AVE.
Address 2:
City: FORT SMITH State: AR Zip: 72901 + __ __ __ __
Contact Person: James P. Williams
Phone: (479) 461-6553
Lease Name: LESAGE
Well Number: 6

API No.: 15-163-01322-00-01
Permit No: D31882.0
Reporting Year: 2018
(January 1 to December 31)

NW - SE - NE - NE Sec. 18 Twp. 7 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
4292 feet from ☐ N / ☑ S Line of Section
362 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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	7130	0	0	0	31
February	6440	0	0	0	28
March	7130	0	0	0	31
April	6900	0	0	0	30
May	7130	0	0	0	31
June	6900	0	0	0	30
July	7130	0	0	0	31
August	7130	0	0	0	31
September	6900	0	0	0	30
October	7130	0	0	0	31
November	6900	0	0	0	30
December	7130	0	0	0	31
TOTAL	83950		0		

Submitted Electronically