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 # 5663
Name: Hess Oil Company
Address 1: PO BOX 1009
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 1009
Contact Person: Bryan Hess
Phone: (620) 241-4640
Lease Name: AKERSON
Well Number: 5

API No.: 15-113-19291-00-01
Permit No: E19281.4
Reporting Year: 2018
(January 1 to December 31)

____ - ____ - NE - S2 Sec. 27 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
3309 feet from ☐ N / ☑ S Line of Section
1295 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: Mississippi
Maximum Authorized Injection Rate: 900 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	4123	0	0	0	31
February	3325	0	0	0	25
March	4123	0	0	0	31
April	3990	0	0	0	30
May	4123	0	0	0	31
June	3990	0	0	0	30
July	4123	0	0	0	31
August	4123	0	0	0	31
September	3990	0	0	0	30
October	4123	0	0	0	31
November	3990	0	0	0	20
December	4123	0	0	0	31
TOTAL	48146		0		

Submitted Electronically