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 # 6078
Name: Evans Oil Inc.
Address 1: PO BOX 67
Address 2:
City: LEBO State: KS Zip: 66856 + 0067
Contact Person: matt Bowen
Phone: (316) 644-8325
Lease Name: RE CAMP
Well Number: 20-OE

API No.: 15-011-24376-00-01
Permit No: E30640.7
Reporting Year: 2018
(January 1 to December 31)

____ - SE - SE - SE Sec. 25 Twp. 23 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
247 feet from ☐ N / ☑ S Line of Section
545 feet from ☑ E / ☐ W Line of Section
County: Bourbon

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: 450 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 50 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					
February					
March					
April					
May					
June					
July					
August					
September					
October	310	0	0	0	31
November	300	0	0	0	30
December	310	0	0	0	31
TOTAL	920		0		

Submitted Electronically