

ANNUAL REPORT OF PRESSURE MONITORING, FLUID INJECTION AND ENHANCED RECOVERY

API No.: _____

Permit No.: _____

Reporting Year: _____
(January 1 to December 31)

_____-_____-_____ - ____ Sec. _____ Twp. _____ S. R. _____ ☐ E ☐ W
(aaa aa)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

County: _____

Submitted Electronically

Summary of Changes

Lease Name and Number: EDGAR HUTCHISON 10-12 SWD

Doc ID: 1453216

Correction Number: 1

Field Name	Previous Value	New Value
Operator's Contact Name	Douglas Lamb	Charles King
Save Link	../kcc/detail/operatorEditDetail.cfm?docID=1453214	../kcc/detail/operatorEditDetail.cfm?docID=1453216