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 # 33562
Name: Hayden, Shawn or Blanche dba Hayden Operating
Address 1: 601 WICHITA AVE
Address 2: PO BOX 606
City: SATANTA State: KS Zip: 67870 + ___ ___ ___ ___
Contact Person: Blanche Hayden
Phone: ( 620 ) 649-2170
Lease Name: LIZ SMITH
Well Number: 2

API No.: 15-081-20279-00-02
Permit No: D27913.0
Reporting Year: 2018
*(January 1 to December 31)*

SE - NW - NE - NE Sec. 26 Twp. 30 S. R. 34 ☐ E ☑ W
*(Q/Q/Q/Q)*
4626 feet from ☐ N / ☑ S Line of Section
675 feet from ☑ E / ☐ W Line of Section
County: Haskell

**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: 500 psi Injection Zone: LANSING-KANSAS CITY,MARMATON
Maximum Authorized Injection Rate: 2000 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 | 8292 | 34529 | 0 | 0 | 29 |
| February | 7182 | 345 | 0 | 0 | 27 |
| March | 11827 | 340 | 0 | 0 | 31 |
| April | 9487 | 340 | 0 | 0 | 27 |
| May | 7653 | 340 | 0 | 0 | 23 |
| June | 8193 | 300 | 0 | 0 | 27 |
| July | 10898 | 300 | 0 | 0 | 29 |
| August | 11896 | 300 | 0 | 0 | 28 |
| September | 7324 | 275 | 0 | 0 | 22 |
| October | 6702 | 275 | 0 | 0 | 25 |
| November | 12533 | 275 | 0 | 0 | 28 |
| December | 11276 | 275 | 0 | 0 | 25 |
| ***TOTAL*** | 113263 | | 0 | | |

Submitted Electronically