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 # 34503
Name: Sam W. Mays Jr. LLC dba MAYS OIL LLC
Address 1: PO BOX 391
Address 2:
City: EUREKA State: KS Zip: 67045 + 0391
Contact Person: Sam Mays III
Phone: (918) 698-4580
Lease Name: BRYDEN II
Well Number: 14A-SWD

API No.: 15-073-20903-00-01
Permit No: E26785.1
Reporting Year: 2018
(January 1 to December 31)

____ - NE - SE - NE Sec. 36 Twp. 25 S. R. 8 ☑ E ☐ W
(Q/Q/Q/Q)
3390 feet from ☐ N / ☑ S Line of Section
262 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 300 psi Injection Zone: DOUGLAS
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	160	100	0	0	31
February	160	100	0	0	28
March	160	100	0	0	31
April	160	100	0	0	30
May	160	100	0	0	31
June	160	100	0	0	30
July	160	100	0	0	31
August	160	100	0	0	31
September	160	100	0	0	30
October	160	100	0	0	31
November	160	100	0	0	30
December	160	100	0	0	31
TOTAL	1920		0		

Submitted Electronically