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 # 35137
Name: Hembree Oilfield Services, LLC
Address 1: 128 NW 30 AVE
Address 2:
City: GREAT BEND State: KS Zip: 67530 + 9002
Contact Person: Hunter Hembree
Phone: ( 620 ) 791-7109
Lease Name: WEST
Well Number: 3

API No.: 15-009-23076-00-01
Permit No: E32136.1
Reporting Year: 2018
*(January 1 to December 31)*

____ - ____ - ____ - SW Sec. 24 Twp. 19 S. R. 14 ☐ E ☑ W
*(Q/Q/Q/Q)*
1320 feet from ☐ N / ☑ S Line of Section
1320 feet from ☐ E / ☑ W Line of Section
County: Barton

**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: 1000 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 200 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 | 150 | 0 | 0 | | 31 |
| February | 150 | 0 | 0 | | 28 |
| March | 150 | 0 | 0 | | 31 |
| April | 150 | 0 | 0 | | 30 |
| May | 150 | 0 | 0 | | 31 |
| June | 150 | 0 | 0 | | 30 |
| July | 150 | 0 | 0 | | 31 |
| August | 150 | 0 | 0 | | 31 |
| September | 150 | 0 | 0 | | 30 |
| October | 150 | 0 | 0 | | 31 |
| November | 150 | 0 | 0 | | 30 |
| December | 150 | 0 | 0 | | 31 |
| ***TOTAL*** | 1800 | | 0 | | |

Submitted Electronically