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 # 6044
Name: Stelbar Oil Corporation, Inc.
Address 1: 1625 N WATERFRONT PKWY STE 200
Address 2:
City: WICHITA State: KS Zip: 67206 + 6602
Contact Person: Dustin Damme
Phone: (316) 264-8378
Lease Name: SHAWVER FEE
Well Number: 3

API No.: 15-191-11136-00-02
Permit No: E14030.2
Reporting Year: 2019
(January 1 to December 31)

____ - NE - SW - NW Sec. 26 Twp. 34 S. R. 2 ☑ E ☐ W
(Q/Q/Q/Q)
3540 feet from ☐ N / ☑ S Line of Section
4260 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: Mississippian
Maximum Authorized Injection Rate: 1000 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	3577	0	0	0	31
February	2829	0	0	0	28
March	3091	0	0	0	31
April	2963	0	0	0	30
May	2386	0	0	0	31
June	1951	0	0	0	30
July	2109	0	0	0	31
August	2447	0	0	0	31
September	1725	0	0	0	30
October	1540	0	0	0	31
November	724	0	0	0	30
December	3127	0	0	0	31
TOTAL	28469		0		

Submitted Electronically