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 # 32016
Name: Pioneer Resources Inc.
Address 1: 80 WINDMILL DR.
Address 2:
City: PHILLIPSBURG State: KS Zip: 67661 + 7125
Contact Person: Rodger Wells
Phone: (785) 543-5556
Lease Name: HULL
Well Number: 1

API No.: 15-065-22944-00-01
Permit No: D28473.0
Reporting Year: 2019
(January 1 to December 31)

____ - NE - SE - SE Sec. 9 Twp. 8 S. R. 23 ☐ E ☑ W
(Q/Q/Q/Q)
1124 feet from ☐ N / ☑ S Line of Section
419 feet from ☑ E / ☐ W Line of Section
County: Graham

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: 0 psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: 750 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	682	0			31
February	616	0			28
March	680	0			31
April	660	0			30
May	682	0			31
June	660	0			30
July	680	0			31
August	680	0			31
September	660	0			30
October	682	0			31
November	661	0			30
December	683	0			31
TOTAL	8026		0		

Submitted Electronically