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 # 35116
Name: SM Oil & Gas, Inc.
Address 1: PO BOX 189
Address 2:
City: SKIATOOK State: OK Zip: 74070 + 0189
Contact Person: Stan Miller II
Phone: (918) 798-4506
Lease Name: DAY
Well Number: 3

API No.: 15-019-23580-00-00
Permit No: D20987.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SW - NE Sec. 19 Twp. 33 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
3451 feet from ☐ N / ☑ S Line of Section
2537 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 120 psi Injection Zone: Arbuckle
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	3711	0	0		24
February	2355	0	0		16
March	4710	0	0		31
April	3768	0	0		25
May	4867	0	0		31
June	4710	0	0		30
July	3454	0	0		22
August	4895	0	0		31
September	2355	0	0		15
October	0	0	0		0
November	2355	0	0		17
December	264	150	0		2
TOTAL	37444		0		

Submitted Electronically