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 # 30553
Name: Unrein, Glenn dba Unrein Oil Co
Address 1: PO BOX 1056
Address 2:
City: HAYS State: KS Zip: 67601 + 1056
Contact Person: Glenn Unrein
Phone: (785) 628-6231
Lease Name: EGGER
Well Number: 3-SWD

API No.: 15-051-00458-00-01
Permit No: D32742.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - NW - SW Sec. 6 Twp. 13 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
2310 feet from ☐ N / ☑ S Line of Section
4950 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 250 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	0	0	0	0	0
February	450	0	0	0	03
March	4650	0	0	0	31
April	4400	0	0	0	30
May	4650	0	0	0	31
June	4400	0	0	0	30
July	4400	0	0	0	30
August	4650	0	0	0	31
September	4400	0	0	0	30
October	4650	0	0	0	31
November	4400	0	0	0	30
December	4650	0	0	0	31
TOTAL	45700		0		

Submitted Electronically