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 # 33985
Name: Clare, Warren Edward
Address 1: 4322 CENTER OAK WOODS ST.
Address 2:
City: SAN ANTONIO State: TX Zip: 78249 + 1802
Contact Person: Kevin F. Hough
Phone: (210) 492-3025
Lease Name: POPE
Well Number: 1 (3)

API No.: 15-113-05327-00-00
Permit No: D21887.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SE - SW Sec. 5 Twp. 18 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
368 feet from ☐ N / ☑ S Line of Section
3775 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: ARBUCKLE
Maximum Authorized Injection Rate: 500 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	4200	0	0		31
February	3360	0	0		28
March	4185	0	0		31
April	4050	0	0		30
May	4185	0	0		31
June	4050	0	0		30
July	4185	0	0		31
August	4185	0	0		31
September	4050	0	0		30
October	4185	0	0		31
November	4030	0	0		30
December	4285	0	0		31
TOTAL	48950		0		

Submitted Electronically