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 # 33168
Name: Woolsey Operating Company, LLC
Address 1: 125 N MARKET STE 1000
Address 2:
City: WICHITA State: KS Zip: 67202 + 1729
Contact Person: DEBRA CLINGAN
Phone: (316) 267-4379
Lease Name: HOSTETLER
Well Number: 1 SWD OWWO

API No.: 15-077-21761-00-01
Permit No: D32803.0
Reporting Year: 2019
(January 1 to December 31)

NW - SE - SE - SW Sec. 30 Twp. 31 S. R. 7 ☐ E ☑ W
(Q/Q/Q/Q)
339 feet from ☐ N / ☑ S Line of Section
3186 feet from ☑ E / ☐ W Line of Section
County: Harper

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: 7000 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					
February					
March					
April	300	0	0		6
May	16790	0	0		27
June	5480	0	0		30
July	5580	0	0		31
August	4140	0	0		23
September	0				0
October	0				0
November	0				0
December	0				0
TOTAL	32290		0		

Submitted Electronically