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 # 30555
Name: Herrick, John dba J. Herrick Pro
Address 1: 1817 MONTANA
Address 2:
City: PRINCETON State: KS Zip: 66078 + 9124
Contact Person: john herrick
Phone: (785) 242-6423
Lease Name: LOWE
Well Number: 1A

API No.: 15-121-27516-00-00
Permit No: E27807.1
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SE - NE Sec. 30 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
3654 feet from ☐ N / ☑ S Line of Section
1183 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 275 psi Injection Zone: PERU
Maximum Authorized Injection Rate: 40 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	222				31
February	200				29
March	232				31
April	231				30
May	227				31
June	225				30
July	231				31
August	234				30
September	238				30
October	229				31
November	231				30
December	233				31
TOTAL	2733		0		

Submitted Electronically