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 # 31246
Name: Beckenholdt, Max C. dba C & M Oil Company
Address 1: 1940 RD 10
Address 2:
City: MOLINE State: KS Zip: 67353 + 9014
Contact Person: Clay Beckenholdt
Phone: (620) 688-1352
Lease Name: BRIGGS
Well Number: 15 W

API No.: 15-019-26015-00-00
Permit No: E24661.5
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NE - NE Sec. 8 Twp. 32 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4336 feet from ☐ N / ☑ S Line of Section
912 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: 400 psi Injection Zone: MARMATON
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(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	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	0		0		

Submitted Electronically