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 # 5192
Name: Shawmar Oil & Gas Co., Inc.
Address 1: 1116 E MAIN
Address 2: PO BOX 9
City: MARION State: KS Zip: 66861 + 0009
Contact Person: Sherry Soyez
Phone: (620) 382-2932
Lease Name: BUCHMAN
Well Number: 2-18

API No.: 15-017-20772-00-00
Permit No: D27488.0
Reporting Year: 2019
(January 1 to December 31)

SW - NE - ____ - ____ Sec. 18 Twp. 18 S. R. 7 ☑ E ☐ W
(Q/Q/Q/Q)
3306 feet from ☐ N / ☑ S Line of Section
1994 feet from ☑ E / ☐ W Line of Section
County: Chase

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: 600 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	450	0	0	0	18
February	675	0	0	0	27
March	775	0	0	0	31
April	675	0	0	0	27
May	775	0	0	0	31
June	750	0	0	0	30
July	775	0	0	0	31
August	675	0	0	0	27
September	725	0	0	0	29
October	775	0	0	0	31
November	675	0	0	0	27
December	775	0	0	0	31
TOTAL	8500		0		

Submitted Electronically