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 # 6236
Name: MTM Petroleum, Inc.
Address 1: 2370 SOUTH STATE ROAD 14
Address 2: PO BOX 391
City: KINGMAN State: KS Zip: 67068 + 0391
Contact Person: Nick Miller
Phone: (620) 955-6014
Lease Name: MITCHELL
Well Number: 3

API No.: 15-095-01793-00-00
Permit No: D08176.0
Reporting Year: 2019
(January 1 to December 31)

NE - NE - NE - NE Sec. 31 Twp. 29 S. R. 7 ☐ E ☑ W
(Q/Q/Q/Q)
5130 feet from ☐ N / ☑ S Line of Section
150 feet from ☑ E / ☐ W Line of Section
County: Kingman

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: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	31663				31
February	28729				28
March	31554				31
April	30661				30
May	31559				31
June	30557				30
July	31557				31
August	30653				31
September	28637				30
October	29493				31
November	28615				30
December	29331				31
TOTAL	363009		0		

Submitted Electronically