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 # 33809
Name: Belport Oil, Inc.
Address 1: 1719 S BOSTON AVE
Address 2:
City: TULSA State: OK Zip: 74119 + 4809
Contact Person: George Davenport
Phone: (918) 637-5476
Lease Name: OSCAR WEST
Well Number: 702 W

API No.: 15-185-12892-00-01
Permit No: E06336.9
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NW - SE Sec. 22 Twp. 22 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
1645 feet from ☐ N / ☑ S Line of Section
2018 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: 700 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 700 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	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	1500	670	0	0	31
November	1950	640	0	0	30
December	1600	610	0	0	31
TOTAL	5050		0		

Submitted Electronically