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 # 32194
Name: Calvert, Clyde E. dba C & C Oil & Gas
Address 1: 461 NW 60 AVE
Address 2:
City: HARPER State: KS Zip: 67058 + 8039
Contact Person: Cheryl Calvert
Phone: (620) 896-2394
Lease Name: WINGATE
Well Number: 6

API No.: 15-077-20061-00-01
Permit No: D14329.0
Reporting Year: 2019
(January 1 to December 31)

NW - SE - SW - SW Sec. 7 Twp. 31 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
456 feet from ☐ N / ☑ S Line of Section
4333 feet from ☑ E / ☐ W Line of Section
County: Harper

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: 2227744 mg/l Specific Gravity: 1.15126 Additives: None
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 1500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 8 *(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	100	0	0	0	30
July	150	0	0	0	31
August	150	0	0	0	31
September	200	0	0	0	30
October	150	0	0	0	31
November	200	0	0	0	30
December	200	0	0	0	31
TOTAL	1150		0		

Submitted Electronically