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 # 5254
Name: Midco Exploration, Inc.
Address 1: PO BOX 1278
Address 2:
City: WESTMONT State: IL Zip: 60559 + 3878
Contact Person: Earl J. Joyce, Jr.
Phone: (630) 655-2198
Lease Name: BIGGS
Well Number: 4

API No.: 15-095-21852-00-00
Permit No: D28327.0
Reporting Year: 2019
(January 1 to December 31)

SE - NW - NW - NW Sec. 13 Twp. 28 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
4785 feet from ☐ N / ☑ S Line of Section
4785 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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2500 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	26350				31
February	24170				28
March	26350				31
April	25500				30
May	26350				31
June	25500				30
July	26350				31
August	26350				31
September	25500				30
October	26350				31
November	25500				30
December	26350				31
TOTAL	310620		0		

Submitted Electronically