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 # 32693
Name: Hawkins Oil, LLC
Address 1: 427 S BOSTON AVE STE 915
Address 2:
City: TULSA State: OK Zip: 74103 + 4114
Contact Person: Dan Flowers
Phone: (918) 382-7743
Lease Name: N WILSON
Well Number: 1-A

API No.: 15-015-21094-00-00
Permit No: D19568.0
Reporting Year: 2019
(January 1 to December 31)

____ - NW - SW - NE Sec. 9 Twp. 25 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
3635 feet from ☐ N / ☑ S Line of Section
2396 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 200 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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
February	0	0			0
March	0	0			0
April	85	0			1
May	0	0			0
June	75	0			1
July	0	0			0
August	85	0			1
September	0	0			0
October	0	0			0
November	0	0			0
December	0	0			0
TOTAL	245		0		

Submitted Electronically