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: ROBINSON
Well Number: 15A

API No.: 15-015-20753-00-01
Permit No: E26879.1
Reporting Year: 2019
(January 1 to December 31)

____ - NE - SW - SW Sec. 17 Twp. 25 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
913 feet from ☐ N / ☑ S Line of Section
4462 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: 1200 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1200 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	3565	575			31
February	3220	575			28
March	3565	575			31
April	3450	575			30
May	3565	575			31
June	3450	575			30
July	3565	575			31
August	3565	575			31
September	3450	575			30
October	3565	575			31
November	3450	575			30
December	3565	575			31
TOTAL	41975		0		

Submitted Electronically