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 # 3630
Name: McCorgary, Martin dba McCorgary Operations
Address 1: 1180 322ND RD
Address 2:
City: ARKANSAS CITY State: KS Zip: 67005 + 5452
Contact Person: Kelly McCorgary
Phone: (620) 442-4437
Lease Name: HEUSZEL
Well Number: 10

API No.: 15-191-21338-00-01
Permit No: E21317.1
Reporting Year: 2019
(January 1 to December 31)

____ - SE - SE - SE Sec. 17 Twp. 35 S. R. 2 ☑ E ☐ W
(Q/Q/Q/Q)
340 feet from ☐ N / ☑ S Line of Section
320 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: 500 psi Injection Zone: LAYTON
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	7440	0	0	0	31
February	6720	0	0	0	28
March	7440	0	0	0	31
April	7200	0	0	0	30
May	7440	0	0	0	31
June	7200	0	0	0	30
July	7440	0	0	0	31
August	7440	0	0	0	31
September	7200	0	0	0	30
October	7440	0	0	0	31
November	7200	0	0	0	30
December	7440	0	0	0	31
TOTAL	87600		0		

Submitted Electronically