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 # 33252
Name: Matador, Inc.
Address 1: PO BOX 337
Address 2:
City: SEDAN State: KS Zip: 67361 + 0337
Contact Person: Tim Nordell
Phone: (620) 725-3366
Lease Name: HOMESTEAD
Well Number: 9

API No.: 15-019-26949-00-00
Permit No: D30455.0
Reporting Year: 2019
(January 1 to December 31)

NE - NE - SE - SE Sec. 33 Twp. 33 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
1009 feet from ☐ N / ☑ S Line of Section
284 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 300 psi Injection Zone: ARBUCKLE
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	2635	0	0	0	31
February	2380	0	0	0	28
March	2635	0	0	0	31
April	2550	0	0	0	30
May	2635	0	0	0	31
June	2550	0	0	0	30
July	2635	0	0	0	31
August	2635	0	0	0	31
September	2550	0	0	0	30
October	2635	0	0	0	31
November	2550	0	0	0	30
December	2635	0	0	0	31
TOTAL	31025		0		

Submitted Electronically