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 # 34503
Name: Sam W. Mays Jr. LLC dba MAYS OIL LLC
Address 1: PO BOX 391
Address 2:
City: EUREKA State: KS Zip: 67045 + 0391
Contact Person: Sam Mays
Phone: (918) 698-4580
Lease Name: PETERS
Well Number: 1A

API No.: 15-135-23848-00-01
Permit No: D28537.0
Reporting Year: 2019
(January 1 to December 31)

SW - NW - ____ - ____ Sec. 21 Twp. 18 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
3300 feet from ☐ N / ☑ S Line of Section
4570 feet from ☑ E / ☐ W Line of Section
County: Ness

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: no
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Mississippian
Maximum Authorized Injection Rate: 1200 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	2170	0	0	0	31
February	1960	0	0	0	28
March	2170	0	0	0	31
April	2100	0	0	0	30
May	2170	0	0	0	31
June	2100	0	0	0	30
July	2170	0	0	0	31
August	2170	0	0	0	31
September	2100	0	0	0	30
October	2170	0	0	0	31
November	2100	0	0	0	30
December	2170	0	0	0	31
TOTAL	25550		0		

Submitted Electronically