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 # 34904
Name: Palmer Oil, Inc.
Address 1: 3118 N. CUMMINGS RD.
Address 2: PO BOX 399
City: GARDEN CITY State: KS Zip: 67846 + 0399
Contact Person: Kevin Wiles
Phone: ( 620 ) 275-2963
Lease Name: UPC
Well Number: 23-4

API No.: 15-189-22813-00-00
Permit No: E31788.1
Reporting Year: 2020
*(January 1 to December 31)*

SW - NE - SE - SW Sec. 23 Twp. 32 S. R. 37 ☐ E ☑ W
*(Q/Q/Q/Q)*
922 feet from ☐ N / ☑ S Line of Section
2087 feet from ☐ E / ☑ W Line of Section
County: Stevens

**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: St Loius
Maximum Authorized Injection Rate: 2000 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 | 36890 | 0 | 0 | 0 | 31 |
| February | 34510 | 0 | 0 | 0 | 29 |
| March | 36890 | 0 | 0 | 0 | 31 |
| April | 35700 | 0 | 0 | 0 | 30 |
| May | 36890 | 0 | 0 | 0 | 31 |
| June | 35700 | 0 | 0 | 0 | 30 |
| July | 36890 | 0 | 0 | 0 | 31 |
| August | 36890 | 0 | 0 | 0 | 31 |
| September | 35700 | 0 | 0 | 0 | 30 |
| October | 36890 | 0 | 0 | 0 | 31 |
| November | 35700 | 0 | 0 | 0 | 30 |
| December | 36890 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 435540 | | 0 | | |

Submitted Electronically