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 # 32145
Name: Baugher, Tom dba B & B Oil Recovery
Address 1: 27914 NE 2250TH RD
Address 2:
City: GREELEY State: KS Zip: 66033 + 9178
Contact Person: tom baugher
Phone: ( 785 ) 448-9063
Lease Name: WITTMAN
Well Number: 1-SWD-84

API No.: 15-003-22425-00-00
Permit No: D23378.0
Reporting Year: 2020
*(January 1 to December 31)*

SW - SE - NE - NE Sec. 21 Twp. 20 S. R. 20 ☑ E ☐ W
*(Q/Q/Q/Q)*
4125 feet from ☐ N / ☑ S Line of Section
630 feet from ☑ E / ☐ W Line of Section
County: Anderson

**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: 400 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 200 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 | 100 | 0 | 0 | | 15 |
| February | 0 | | 0 | | |
| March | 200 | | 0 | | 31 |
| April | 0 | | 0 | | |
| May | 0 | | 0 | | |
| June | 0 | | 0 | | |
| July | 0 | | 0 | | |
| August | 0 | | 0 | | |
| September | 200 | 0 | 0 | | 30 |
| October | 200 | 0 | 0 | | 31 |
| November | 200 | 0 | 0 | | 30 |
| December | 100 | 0 | 0 | | 15 |
| ***TOTAL*** | 1000 | | 0 | | |

Submitted Electronically