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 # 8653
Name: Petroleum Technologies, Inc.
Address 1: 801 W 47TH ST STE 412
Address 2:
City: KANSAS CITY State: MO Zip: 64112 + 1253
Contact Person: Alan Seaton
Phone: (816) 531-6904
Lease Name: HOOPER C
Well Number: 2

API No.: 15-185-21875-00-01
Permit No: D24442.0
Reporting Year: 2020
(January 1 to December 31)

____ - SE - SE - NE Sec. 34 Twp. 21 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
2964 feet from ☐ N / ☑ S Line of Section
325 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 3000 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	64604				31
February	60436				29
March	64604				31
April	31260				15
May	0				0
June	0				0
July	20840				10
August	56268				27
September	62520				30
October	64604				31
November	62520				30
December	64604				31
TOTAL	552260		0		

Submitted Electronically