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 # 6239
Name: Zinszer Oil Co., Inc.
Address 1: PO BOX 211
Address 2:
City: HAYS State: KS Zip: 67601 + 0211
Contact Person: Perry Henman
Phone: (785) 625-9448
Lease Name: SPRINGER
Well Number: 4

API No.: 15-083-21294-00-00
Permit No: D25165.0
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - E2 - NW Sec. 26 Twp. 22 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
3949 feet from ☐ N / ☑ S Line of Section
3323 feet from ☑ E / ☐ W Line of Section
County: Hodgeman

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: CEDAR HILLS
Maximum Authorized Injection Rate: 700 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	4995	0	0	0	27
February	5539	0	0	0	29
March	3629	0	0	0	19
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	3519	0	0	0	17
August	5983	0	0	0	31
September	5940	0	0	0	30
October	6076	0	0	0	31
November	6090	0	0	0	30
December	6014	0	0	0	31
TOTAL	47785		0		

Submitted Electronically