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 # 33736
Name: Cortam, Inc.
Address 1: 806 BELMONT AVE
Address 2:
City: AUGUSTA State: KS Zip: 67010 + 2210
Contact Person: Corky Cook
Phone: (316) 775-2521
Lease Name: CLARK B
Well Number: 2

API No.: 15-079-20483-00-01
Permit No: E23640.1
Reporting Year: 2020
(January 1 to December 31)

____ - SE - SW - NE Sec. 35 Twp. 24 S. R. 2 ☑ E ☐ W
(Q/Q/Q/Q)
2998 feet from ☐ N / ☑ S Line of Section
1638 feet from ☑ E / ☐ W Line of Section
County: Harvey

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: BURGESS
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	2440	0			31
February	2280	0			29
March	2440	0			30
April	2370	0			30
May	2410	0			30
June	2100	0			30
July	2170	0			31
August	2170	0			30
September	2170	0			30
October	2170				31
November	1980	0			27
December	2130	0			31
TOTAL	26830		0		

Submitted Electronically