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 # 5225
Name: Quinque Operating Company
Address 1: 908 NW 71ST ST
Address 2:
City: OKLAHOMA CITY State: OK Zip: 73116 + 7402
Contact Person: Catherine Smith
Phone: (405) 840-9876
Lease Name: ADAMS
Well Number: 1-17

API No.: 15-119-20315-00-03
Permit No: D28678.0
Reporting Year: 2020
(January 1 to December 31)

SW - SW - NE - NW Sec. 17 Twp. 35 S. R. 30 ☐ E ☑ W
(Q/Q/Q/Q)
1229 feet from ☑ N / ☐ S Line of Section
1379 feet from ☐ E / ☑ W Line of Section
County: Meade

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: KRIDER, WINFIELD
Maximum Authorized Injection Rate: 500 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	0				0
February	0				0
March	0				0
April	0				0
May	0				0
June	0				0
July	0				0
August	0				0
September	0				0
October	0				0
November	0				0
December	0				0
TOTAL	0		0		

Submitted Electronically