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 # 3074
Name: Robert S. Harwell, Inc.
Address 1: 320 N BROADWAY SUITE 107
Address 2:
City: EDMOND State: OK Zip: 73034 + 3642
Contact Person: robert harwell
Phone: (405) 471-1240
Lease Name: LEMESANEY
Well Number: 3-A

API No.: 15-045-21092-00-01
Permit No: E29081.3
Reporting Year: 2020
(January 1 to December 31)

NW - SE - SW - SW Sec. 11 Twp. 14 S. R. 20 ☑ E ☐ W
(Q/Q/Q/Q)
355 feet from ☐ N / ☑ S Line of Section
4551 feet from ☑ E / ☐ W Line of Section
County: Douglas

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: 525 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 40 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	40				31
February	33				29
March	22				31
April	34				30
May	33				31
June	44				30
July	35				31
August	47				30
September	34				30
October	43				31
November	41				30
December	40				31
TOTAL	446		0		

Submitted Electronically