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 # 5003
Name: McCoy Petroleum Corporation
Address 1: 9342 E CENTRAL
Address 2:
City: WICHITA State: KS Zip: 67206 + 2573
Contact Person: Brent Reinhardt
Phone: (316) 636-2737
Lease Name: HILST - SWDW
Well Number: 2-36

API No.: 15-119-20503-00-01
Permit No: D24992.0
Reporting Year: 2020
(January 1 to December 31)

SW - SE - NW - ____ Sec. 36 Twp. 33 S. R. 29 ☐ E ☑ W
(Q/Q/Q/Q)
2965 feet from ☐ N / ☑ S Line of Section
3629 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: Lkc
Maximum Authorized Injection Rate: 1000 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	3450	0	0	0	31
February	3335	0	0	0	29
March	3565	0	0	0	31
April	3450	0	0	0	30
May	3565	0	0	0	31
June	3335	0	0	0	30
July	2185	0	0	0	31
August	0	0	0	0	31
September	0	0	0	0	30
October	1150	0	0	0	31
November	3105	0	0	0	30
December	2530	0	0	0	31
TOTAL	29670		0		

Submitted Electronically