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 # 32636
Name: Flint Hills Production Co., Inc.
Address 1: PO BOX 13
Address 2:
City: GAS CITY State: KS Zip: 66742 + 0013
Contact Person: Ronald Burris
Phone: ( 620 ) 852-3133
Lease Name: WEEKS
Well Number: 11

API No.: 15-001-26979-00-01
Permit No: E25872.5
Reporting Year: 2020
*(January 1 to December 31)*

____ - NW - SE - NW Sec. 21 Twp. 25 S. R. 18 ☑ E ☐ W
*(Q/Q/Q/Q)*
3512 feet from ☐ N / ☑ S Line of Section
3812 feet from ☑ E / ☐ W Line of Section
County: Allen

**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: 400 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 300 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 | 150 | 400 | | | 31 |
| February | 150 | 400 | | | 28 |
| March | 150 | 400 | | | 31 |
| April | 150 | 400 | | | 30 |
| May | 150 | 400 | | | 31 |
| June | 150 | 400 | | | 30 |
| July | 150 | 400 | | | 31 |
| August | 150 | 400 | | | 31 |
| September | | | | | |
| October | | | | | |
| November | | | | | |
| December | | | | | |
| ***TOTAL*** | 1200 | | 0 | | |

Submitted Electronically