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: 4

API No.: 15-001-02695-00-01
Permit No: E25872.3
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SE - NW Sec. 21 Twp. 25 S. R. 18 ☑ E ☐ W
(Q/Q/Q/Q)
3522 feet from ☐ N / ☑ S Line of Section
3166 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: 7 *(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