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 # 34545
Name: ELM III Operating Company LLC
Address 1: 1249 E. 33RD ST
Address 2:
City: EDMOND State: OK Zip: 73013 + 6307
Contact Person: Tripp Markwell
Phone: (405) 232-0418
Lease Name: HITCH UNIT
Well Number: 3-2

API No.: 15-175-20713-00-02
Permit No: E29010.4
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NW - NW Sec. 11 Twp. 33 S. R. 34 ☐ E ☑ W
(Q/Q/Q/Q)
4285 feet from ☐ N / ☑ S Line of Section
5056 feet from ☑ E / ☐ W Line of Section
County: Seward

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: 2000 psi Injection Zone: CHESTER
Maximum Authorized Injection Rate: 2500 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	5000				31
February	5000				28
March	5000				31
April	5000				30
May	5000				31
June	5000				30
July	5000				31
August	5000				31
September	5000				30
October	5000				31
November	5000				30
December	5000				31
TOTAL	60000		0		

Submitted Electronically