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 # 35523
Name: 3G Production, LLC
Address 1: 10387 NE SR 61
Address 2: PO BOX 847
City: PRATT State: KS Zip: 67124 + 0847
Contact Person: Kenneth C Gates
Phone: (620) 672-2531
Lease Name: SMITH
Well Number: 2-B

API No.: 15-185-19117-00-01
Permit No: D25457.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NW - SE Sec. 16 Twp. 21 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
2258 feet from ☐ N / ☑ S Line of Section
2219 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: ARBUCKLE
Maximum Authorized Injection Rate: 1500 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	3844	0	0	0	31
February	3596	0	0	0	29
March	3844	0	0	0	31
April	3720	0	0	0	30
May	3844	0	0	0	31
June	3720	0	0	0	30
July	3844	0	0	0	31
August	3844	0	0	0	31
September	3720	0	0	0	30
October	3844	0	0	0	31
November	3720	0	0	0	30
December	3844	0	0	0	31
TOTAL	45384		0		

Submitted Electronically