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 # 31448
Name: Everhart, Lawrence D. dba E & E Oil
Address 1: 1823 27TH AVE
Address 2:
City: CANTON State: KS Zip: 67428 + 8824
Contact Person: Wayne Everhart
Phone: (620) 628-4858
Lease Name: MCCULLEY
Well Number: 2

API No.: 15-113-00221-00-02
Permit No: D07471.0
Reporting Year: 2020
(January 1 to December 31)

____ - S2 - SE - SW Sec. 32 Twp. 17 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
331 feet from ☐ N / ☑ S Line of Section
3329 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 250 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	20088	0	0	0	31
February	18792	0	0	0	29
March	20088	0	0	0	31
April	19440	0	0	0	30
May	20088	0	0	0	31
June	19440	0	0	0	30
July	20088	0	0	0	31
August	20088	0	0	0	31
September	19440	0	0	0	30
October	20088	0	0	0	31
November	19440	0	0	0	30
December	20088	0	0	0	31
TOTAL	237168		0		

Submitted Electronically