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 # 33457
Name: Dechant Oil Operations, LLC
Address 1: 521 E SHERMAN ST
Address 2:
City: HUTCHINSON State: KS Zip: 67501 + 7364
Contact Person: Steve Dechant
Phone: (620) 662-5234
Lease Name: DECHANT B
Well Number: 3

API No.: 15-051-03817-00-01
Permit No: D10764.0
Reporting Year: 2020
(January 1 to December 31)

____ - SE - SW - SE Sec. 6 Twp. 15 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
258 feet from ☐ N / ☑ S Line of Section
1745 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: 28.5 Additives:
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	5561	0	0		31
February	5202	0	0		29
March	8180	0	0		31
April	5036	0	0		30
May	4865	0	0		31
June	6904	0	0		30
July	7998	0	0		31
August	7998	0	0		31
September	7920	0	0		30
October	8184	0	0		31
November	7626	0	0		30
December	7868	0	0		31
TOTAL	83342		0		

Submitted Electronically