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 # 32728
Name: Summit Petroleum Inc
Address 1: 525 Broadway
Address 2:
City: GUTHRIE State: OK Zip: 73044 + 8785
Contact Person: Chet Jeffries
Phone: (580) 628-1061
Lease Name: CROW
Well Number: 1-13

API No.: 15-191-21262-00-01
Permit No: D27199.0
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SE - SW Sec. 13 Twp. 35 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
1150 feet from ☐ N / ☑ S Line of Section
3046 feet from ☑ E / ☐ W Line of Section
County: Sumner

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: 350 psi Injection Zone: MISSISSIPPIAN CHAT
Maximum Authorized Injection Rate: 1000 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	400	0	0	0	8
February	300	0	0	0	5
March	500	0	0	0	14
April	500	0	0	0	15
May	400	0	0	0	18
June	600	0	0	0	23
July	400	0	0	0	10
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	3100		0		

Submitted Electronically