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 # 5259
Name: Mai Oil Operations, Inc.
Address 1: 8411 PRESTON RD STE 800
Address 2:
City: DALLAS State: TX Zip: 75225 + 5520
Contact Person: Brent Homeier
Phone: (214) 219-8883
Lease Name: LD MORGENSTERN SWD
Well Number: 6

API No.: 15-009-16181-00-01
Permit No: D04960.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - SW - SE Sec. 33 Twp. 17 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
989 feet from ☐ N / ☑ S Line of Section
2414 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 50 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 1000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	4188	0	0	0	31
February	3780	0	0	0	29
March	4188	0	0	0	31
April	4050	0	0	0	30
May	4188	0	0	0	31
June	4050	0	0	0	30
July	4188	0	0	0	31
August	4188	0	0	0	31
September	4050	0	0	0	30
October	4188	0	0	0	31
November	4050	0	0	0	30
December	4188	0	0	0	31
TOTAL	49296		0		

Submitted Electronically