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 # 5249
Name: Osborn Heirs Company, LTD
Address 1: PO BOX 17968
Address 2:
City: SAN ANTONIO State: TX Zip: 78217 + 0968
Contact Person: Mary Castoreno
Phone: (210) 826-0700
Lease Name: KINZEL
Well Number: 3

API No.: 15-009-20500-00-02
Permit No: D21284.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - SE - SE Sec. 2 Twp. 18 S. R. 12 ☐ E ☑ W
(Q/Q/Q/Q)
1010 feet from ☐ N / ☑ S Line of Section
1107 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: 200 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 100 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	1670	0	0		31
February	1562	0	0		29
March	1670	0	0		31
April	1616	0	0		30
May	1670	0	0		31
June	1616	0	0		30
July	1174	0	0		31
August	1174	0	0		31
September	1136	0	0		30
October	1590	0	0		31
November	1616	0	0		30
December	1670	0	0		31
TOTAL	18164		0		

Submitted Electronically