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 # 5056
Name: F. G. Holl Company L.L.C.
Address 1: 9431 E CENTRAL STE 100
Address 2:
City: WICHITA State: KS Zip: 67206 + 2563
Contact Person: Loveness Mpanje
Phone: (316) 684-8481
Lease Name: FADNER "OWWO"
Well Number: #1-2

API No.: 15-145-21128-00-02
Permit No: D30454.0
Reporting Year: 2020
(January 1 to December 31)

____ - NE - NE - NW Sec. 2 Twp. 20 S. R. 16 ☐ E ☑ W
(Q/Q/Q/Q)
4980 feet from ☐ N / ☑ S Line of Section
2993 feet from ☑ E / ☐ W Line of Section
County: Pawnee

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: 0 psi Injection Zone: REAGAN,ARBUCKLE
Maximum Authorized Injection Rate: 10000 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	12	0	0	0	1
February	147	0	0	0	12
March	147	0	0	0	12
April	49	0	0	0	4
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
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	355		0		

Submitted Electronically