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 # 30304
Name: Taylor, Michael dba M. J. T. Enterprises
Address 1: 37411 JOHN BROWN HWY
Address 2:
City: OSAWATOMIE State: KS Zip: 66064 + 5254
Contact Person: Lesli Baker
Phone: (913) 755-4265
Lease Name: HUNT
Well Number: 15-I

API No.: 15-121-30664-00-00
Permit No: E20607.3
Reporting Year: 2020
(January 1 to December 31)

____ - SE - NW - SE Sec. 7 Twp. 18 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1651 feet from ☐ N / ☑ S Line of Section
1702 feet from ☑ E / ☐ W Line of Section
County: Miami

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 650 psi Injection Zone: Squirrel
Maximum Authorized Injection Rate: 50 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	605	500	0	0	31
February	540	500	0	0	29
March	605	500	0	0	31
April	580	500	0	0	30
May	609	500	0	0	31
June	500	500	0	0	30
July	610	500	0	0	31
August	618	500	0	0	31
September	480	500	0	0	30
October	605	500	0	0	31
November	590	500	0	0	30
December	605	500	0	0	31
TOTAL	6947		0		

Submitted Electronically