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 # 35639
Name: Daylight Petroleum, LLC
Address 1: PO BOX 52070
Address 2:
City: HOUSTON State: TX Zip: 77027 + 2952
Contact Person: Jennifer Peters
Phone: (620) 380-6780
Lease Name: UNIT 1 - WOLFE WEST
Well Number: WW 30-D

API No.: 15-205-27788-00-01
Permit No: E09937.94
Reporting Year: 2020
(January 1 to December 31)

____ - SE - NW - SW Sec. 29 Twp. 30 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
1970 feet from ☐ N / ☑ S Line of Section
4149 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 800 psi Injection Zone: NEODESHA
Maximum Authorized Injection Rate: 700 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 13 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	620	275	0	0	31
February	580	275	0	0	29
March	620	275	0	0	31
April	600	275	0	0	30
May	620	275	0	0	31
June	600	275	0	0	30
July	620	275	0	0	31
August	620	275	0	0	31
September	600	275	0	0	30
October	620	275	0	0	31
November	600	275	0	0	30
December	620	275	0	0	31
TOTAL	7320		0		

Submitted Electronically