

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Lease Name: _____

Well Number: _____

API No.: _____

Permit No.: _____

Reporting Year: _____

(January 1 to December 31)

____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)_____ feet from N / S Line of Section_____ feet from E / W Line of Section

County: _____

I. Injection Fluid:Type (Pick one): Fresh Water Treated Brine Untreated Brine Water/BrineSource: 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: _____ psi Injection Zone: _____

Maximum Authorized Injection Rate: _____ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Submitted Electronically

Summary of Changes

Lease Name and Number: PYWELL 4

Doc ID: 155516

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	02/25/2020	02/19/2021
Number of Days of Injection, April	27	28
Number of Days of Injection, February	28	29
Number of Days of Injection, January	27	31
Number of Days of Injection, July	31	28
Number of Days of Injection, October	25	31
Flagged	No	Yes
Save Link	../..kcc/detail/operatorEditDetail.cfm?docID=1505536	../..kcc/detail/operatorEditDetail.cfm?docID=155516
Total BBL Injected	45408	47929
Total BBL Injected in April	3483	3584
Total BBL Injected in August	3999	4263
Total BBL Injected in December	3999	4263

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total BBL Injected in February	3612	3712
Total BBL Injected in January	3483	3968
Total BBL Injected in July	3999	3850
Total BBL Injected in June	3870	3840
Total BBL Injected in March	3999	3968
Total BBL Injected in May	3999	3968
Total BBL Injected in November	3870	4125
Total BBL Injected in October	3225	4263
Total BBL Injected in September	3870	4125