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 # 32702
Name: Kutter Oil, Inc.
Address 1: 701 E RIVER ST
Address 2:
City: EUREKA State: KS Zip: 67045 + 2100
Contact Person: Brayn Smith
Phone: (620) 583-3242
Lease Name: MARSHALL
Well Number: 1

API No.: 15-015-21003-00-01
Permit No: E23445.1
Reporting Year: 2020
(January 1 to December 31)

____ - SW - SW - SW Sec. 11 Twp. 26 S. R. 7 ☑ E ☐ W
(Q/Q/Q/Q)
575 feet from ☐ N / ☑ S Line of Section
5066 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 150 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 300 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	0	0	0		31
February	0	0	0		29
March	0	0	0		31
April	0	0	0		30
May	0	0	0		31
June	0	0	0		30
July	0	0	0		31
August	0	0	0		31
September	0	0	0		30
October	0	0	0		31
November	0	0	0		30
December	0	0	0		31
TOTAL	0		0		

Submitted Electronically