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 # 5375
Name: Hillenburg Oil Co., a General Partnership
Address 1: 11600 S LYNN LANE RD
Address 2:
City: BROKEN ARROW State: OK Zip: 74011 + 4021
Contact Person: Andy Hillenburg
Phone: (918) 455-4444
Lease Name: NORTH LATHROP
Well Number: 21

API No.: 15-015-19135-00-01
Permit No: D28085.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NE - NW Sec. 17 Twp. 23 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
5054 feet from ☐ N / ☑ S Line of Section
3630 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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 15000 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	46376				31
February	41888				28
March	46376				31
April	44880				30
May	46376				31
June	44880				30
July	46376				31
August	46376				31
September	44880				30
October	46376				31
November	44880				30
December	46376				31
TOTAL	546040		0		

Submitted Electronically