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 # 30252
Name: Patteson Oil, a General Partnership
Address 1: PO BOX 177
Address 2:
City: MOLINE State: KS Zip: 67353 + 0177
Contact Person: Tom Patteson
Phone: (620) 647-3203
Lease Name: SHAFFER E
Well Number: 7

API No.: 15-019-26177-00-00
Permit No: E26482.1
Reporting Year: 2020
(January 1 to December 31)

NE - SW - SE - NE Sec. 23 Twp. 32 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
3307 feet from ☐ N / ☑ S Line of Section
667 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 600 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 600 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	5735	0	0	0	31
February	5365	0	0	0	28
March	5735	0	0	0	31
April	5550	0	0	0	30
May	5735	0	0	0	31
June	5550	0	0	0	30
July	5735	0	0	0	31
August	5735	0	0	0	31
September	5550	0	0	0	30
October	5735	0	0	0	31
November	5465	0	0	0	30
December	5735	0	0	0	31
TOTAL	67625		0		

Submitted Electronically