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: HUGENOT
Well Number: 3

API No.: 15-019-21153-00-00
Permit No: D19654.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - SW - NW Sec. 14 Twp. 32 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
3614 feet from ☐ N / ☑ S Line of Section
4945 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: 400 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 2000 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	4030	0	0	0	31
February	4030	0	0	0	28
March	4030	0	0	0	31
April	3850	0	0	0	30
May	4030	0	0	0	31
June	3900	0	0	0	30
July	4030	0	0	0	31
August	4030	0	0	0	31
September	3900	0	0	0	30
October	4030	0	0	0	31
November	3900	0	0	0	30
December	4030	0	0	0	31
TOTAL	47790		0		

Submitted Electronically