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 # 30535
Name: Hartman Oil Co., Inc.
Address 1: 10500 E BERKELEY SQ PKWY STE 100
Address 2:
City: WICHITA State: KS Zip: 67206 + 6816
Contact Person: Catherine Hartman
Phone: (316) 636-2090
Lease Name: SUPERNAUGH
Well Number: D-7

API No.: 15-015-30299-00-00
Permit No: D13094.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - SE - NW Sec. 4 Twp. 23 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
3199 feet from ☐ N / ☑ S Line of Section
3508 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: 500 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 3500 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	35774	0	0	0	31
February	33466	0	0	0	29
March	35774	0	0	0	31
April	34620	0	0	0	30
May	35774	0	0	0	31
June	34620	0	0	0	30
July	35774	0	0	0	31
August	35774	0	0	0	31
September	34620	0	0	0	30
October	35774	0	0	0	31
November	34620	0	0	0	30
December	35774	0	0	0	31
TOTAL	422364		0		

Submitted Electronically