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 # 34179
Name: Thomas M. Brown LLC
Address 1: PO BOX 250
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + 0250
Contact Person: Jake Brown
Phone: (785) 434-7141
Lease Name: MCMILLEN
Well Number: 4

API No.: 15-163-19133-00-03
Permit No: E08544.2
Reporting Year: 2020
(January 1 to December 31)

____ - NE - SW - SE Sec. 24 Twp. 8 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
991 feet from ☐ N / ☑ S Line of Section
1770 feet from ☑ E / ☐ W Line of Section
County: Rooks

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: 1000 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 500 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	13408	0	0	0	31
February	12543	0	0	0	29
March	13408	0	0	0	31
April	12975	0	0	0	30
May	13408	0	0	0	31
June	12975	0	0	0	30
July	13408	0	0	0	31
August	13408	0	0	0	31
September	12975	0	0	0	30
October	13408	0	0	0	31
November	12975	0	0	0	30
December	13408	0	0	0	31
TOTAL	158299		0		

Submitted Electronically