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 # 33427
Name: Petroleum Production Corporation
Address 1: 2 S GOLD ST
Address 2:
City: PAOLA State: KS Zip: 66071 + 1403
Contact Person: barb green
Phone: (913) 557-9639
Lease Name: LOOMER
Well Number: A-12

API No.: 15-121-25140-00-02
Permit No: E29072.2
Reporting Year: 2020
(January 1 to December 31)

____ - NW - SW - SE Sec. 31 Twp. 16 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
1076 feet from ☐ N / ☑ S Line of Section
2239 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 700 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 200 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	650	400	0	0	31
February	440	400	0	0	29
March	490	400	0	0	31
April	120	400	0	0	30
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	0	0	0	0	0
TOTAL	1700		0		

Submitted Electronically