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 # 35220
Name: James P. Williams Enterprises, Inc.
Address 1: 802 MAIN STREET
Address 2: PO BOX 226
City: PALCO State: KS Zip: 67657 + 0226
Contact Person: James P. Williams
Phone: (479) 461-6553
Lease Name: WEBSTER
Well Number: 2

API No.: 15-163-02859-00-02
Permit No: D32973.0
Reporting Year: 2020
(January 1 to December 31)

NE - SW - NW - SE Sec. 34 Twp. 9 S. R. 19 ☐ E ☑ W
(Q/Q/Q/Q)
1655 feet from ☐ N / ☑ S Line of Section
2309 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: _____ psi Injection Zone: CEDAR HILLS
Maximum Authorized Injection Rate: _____ 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	1050	0	0	0	14
August	2325	0	0	0	31
September	2250	0	0	0	30
October	2325	0	0	0	31
November	2250	0	0	0	30
December	2325	0	0	0	31
TOTAL	12525		0		

Submitted Electronically