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 # 5004
Name: Vincent Oil Corporation
Address 1: 200 W DOUGLAS AVE #725
Address 2:
City: WICHITA State: KS Zip: 67202 + 3023
Contact Person: Bryan Hills
Phone: (316) 262-3573
Lease Name: HORNING
Well Number: 2

API No.: 15-135-20932-00-00
Permit No: D17616.0
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SW - NW Sec. 10 Twp. 17 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
3477 feet from ☐ N / ☑ S Line of Section
4635 feet from ☑ E / ☐ W Line of Section
County: Ness

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: CEDAR HILLS
Maximum Authorized Injection Rate: 1000 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	3231				31
February	2918				28
March	3231				31
April	3023				30
May	3231				31
June	3023				30
July	3231				31
August	3231				31
September	3023				30
October	3231				31
November	3023				30
December	3231				31
TOTAL	37627		0		

Submitted Electronically