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 # 35371
Name: Dunham's Oil, LLC
Address 1: 315 N. ST. NICHOLAS ST
Address 2:
City: EUREKA State: KS Zip: 67045 + 1854
Contact Person: Norma Dunham
Phone: ( 620 ) 583-7332
Lease Name: TECTER
Well Number: 5

API No.: 15-113-01687-00-00
Permit No: D02261.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - W2 - SE - NE Sec. 9 Twp. 18 S. R. 1 ☐ E ☑ W
*(Q/Q/Q/Q)*
3274 feet from ☐ N / ☑ S Line of Section
1000 feet from ☑ E / ☐ W Line of Section
County: McPherson

**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: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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 | 465 | 4 | 0 | | 31 |
| February | 420 | 5 | 0 | | 23 |
| March | 465 | 3 | 0 | | 31 |
| April | 450 | 7 | 0 | | 30 |
| May | 450 | 5 | 0 | | 30 |
| June | 450 | 5 | 0 | | 30 |
| July | 465 | 7 | 0 | | 31 |
| August | 465 | 7 | 0 | | 31 |
| September | 450 | 7 | 0 | | 30 |
| October | 465 | 8 | 0 | | 31 |
| November | 450 | 6 | 0 | | 30 |
| December | 465 | 4 | 0 | | 31 |
| ***TOTAL*** | 5460 | | 0 | | |

Submitted Electronically