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 # 32920
Name: W. R. Williams, Inc.
Address 1: PO BOX 15163
Address 2:
City: AMARILLO State: TX Zip: 79105 + 5163
Contact Person: Rob Williams
Phone: (806) 374-4555
Lease Name: LAYTON A
Well Number: 1

API No.: 15-071-20228-00-01
Permit No: D27701.0
Reporting Year: 2021
(January 1 to December 31)

____ - ____ - NW - SE Sec. 33 Twp. 16 S. R. 40 ☐ E ☑ W
(Q/Q/Q/Q)
1997 feet from ☐ N / ☑ S Line of Section
1974 feet from ☑ E / ☐ W Line of Section
County: Greeley

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: 350 psi Injection Zone: TOWANDA,FORT RILEY
Maximum Authorized Injection Rate: 1500 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	6931	90	0	0	31
February	6889	90	0	0	28
March	7297	90	0	0	31
April	7193	90	0	0	30
May	7166	90	0	0	31
June	7183	90	0	0	30
July	7307	90	0	0	31
August	5564	85	0	0	31
September	7396	90	0	0	30
October	7610	95	0	0	31
November	9299	105	0	0	30
December	8092	100	0	0	10
TOTAL	87927		0		

Submitted Electronically