

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 # \_\_\_\_\_  
Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Lease Name: \_\_\_\_\_  
Well Number: \_\_\_\_\_

API No.: \_\_\_\_\_  
Permit No.: \_\_\_\_\_  
Reporting Year: \_\_\_\_\_  
(January 1 to December 31)  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. \_\_\_\_ S. R. \_\_\_\_  E  W  
(a/a/a/a)  
\_\_\_\_\_ feet from  N /  S Line of Section  
\_\_\_\_\_ feet from  E /  W Line of Section  
County: \_\_\_\_\_

**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: \_\_\_\_\_  
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<br>BBL | Maximum Fluid<br>Pressure | Total Gas Injected<br>MCF | Maximum Gas<br>Pressure | # Days of<br>Injection |
|------|--------------|-----------------------------|---------------------------|---------------------------|-------------------------|------------------------|
|      | January      | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | February     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | March        | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | April        | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | May          | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | June         | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | July         | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | August       | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | September    | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | October      | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | November     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | December     | _____                       | _____                     | _____                     | _____                   | _____                  |
|      | <b>TOTAL</b> | _____                       | _____                     | _____                     | _____                   | _____                  |

## Complete Water Analysis Report

Customer: **E & E OIL COMPANY**  
 Region: **Kansas**  
 Location: **McPherson County**  
 System: **Production System**

Equipment: **Stucky Holloway 7**  
 Sample Point: **Wellhead**  
 Sample ID: **AR35109**  
 Acct Rep Email: **Ronnie.Hoover@championx.com**

Collection Date: **05/21/2021**  
 Receive Date: **05/25/2021**  
 Report Date: **05/26/2021**  
 Location Code: **145968**

### Field Analysis

|                  |                 |               |                |               |               |
|------------------|-----------------|---------------|----------------|---------------|---------------|
| Bicarbonate      | <b>122</b> mg/L | Dissolved CO2 | <b>88</b> mg/L | Dissolved H2S | <b>5</b> mg/L |
| Pressure Surface | <b>25</b> psi   | Temperature   | <b>95</b> ° F  | pH of Water   | <b>6.5</b>    |

### Sample Analysis

|                |                   |                  |              |                        |                      |
|----------------|-------------------|------------------|--------------|------------------------|----------------------|
| Ionic Strength | <b>1.52</b> mol/L | Specific Gravity | <b>1.061</b> | Total Dissolved Solids | <b>81936.04</b> mg/L |
|----------------|-------------------|------------------|--------------|------------------------|----------------------|

### Cations

|           |                      |           |                   |           |                   |
|-----------|----------------------|-----------|-------------------|-----------|-------------------|
| Iron      | <b>1.156</b> mg/L    | Manganese | <b>0.124</b> mg/L | Barium    | <b>16.66</b> mg/L |
| Strontium | <b>257.5</b> mg/L    | Calcium   | <b>2641</b> mg/L  | Magnesium | <b>910.6</b> mg/L |
| Sodium    | <b>26140.00</b> mg/L |           |                   |           |                   |

### Anions

|          |                   |         |                 |
|----------|-------------------|---------|-----------------|
| Chloride | <b>51606</b> mg/L | Sulfate | <b>241</b> mg/L |
|----------|-------------------|---------|-----------------|

### Scale Type

|                       |     |                      |       |
|-----------------------|-----|----------------------|-------|
| Anhydrite CaSO4 PTB   | N/A | Anhydrite CaSO4 SI   | -1.35 |
| Barite BaSO4 PTB      | 8.8 | Barite BaSO4 SI      | 0.99  |
| Calcite CaCO3 PTB     | N/A | Calcite CaCO3 SI     | -0.93 |
| Celestite SrSO4 PTB   | N/A | Celestite SrSO4 SI   | -0.37 |
| Gypsum CaSO4 PTB      | N/A | Gypsum CaSO4 SI      | -1.24 |
| Hemihydrate CaSO4 PTB | N/A | Hemihydrate CaSO4 SI | -1.26 |

### Comments

Scaling predictions calculated using Otdo-Tomson model

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