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 # 33215
Name: Taylor, Robert W. dba Taylor Oil Co.
Address 1: PO BOX 894
Address 2:
City: EL DORADO State: KS Zip: 67042 + 0894
Contact Person: ROBERT TAYLOR
Phone: (316) 321-0910
Lease Name: AUGUSTINE J W
Well Number: 2

API No.: 15-015-22073-00-01
Permit No: E24437.1
Reporting Year: 2021
(January 1 to December 31)

____ - NW - SW - NE Sec. 1 Twp. 25 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
3505 feet from ☐ N / ☑ S Line of Section
2428 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 100 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 250 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	3038	0			31
February	2744	0			28
March	3038	0			31
April	2940	0			30
May	3038	0			31
June	2940	0			30
July	2450	0			25
August	3038	0			31
September	2940	0			30
October	3038	0			31
November	2940	0			30
December	3038	0			31
TOTAL	35182		0		

Submitted Electronically