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 # 31902
Name: Holt, Carol
Address 1: 400 S 13TH ST
Address 2:
City: INDEPENDENCE State: KS Zip: 67301 + 4026
Contact Person: Tony Holt
Phone: (620) 330-0080
Lease Name: CATLETT
Well Number: 7

API No.: 15-125-19294-00-01
Permit No: E33033.1
Reporting Year: 2021
(January 1 to December 31)

____ - NW - NW - NW Sec. 2 Twp. 33 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
4747 feet from ☐ N / ☑ S Line of Section
5111 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: PERU
Maximum Authorized Injection Rate: 200 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	100	150			20
February	100	150			20
March	150	150			30
April	150	150			30
May	150	150			30
June	200	150			30
July	200	150			30
August	200	150			30
September	200	150			30
October	150	150			20
November	150	150			30
December	100	150			20
TOTAL	1850		0		

Submitted Electronically