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 # 35742
Name: Hett Oil & Gas, LLC
Address 1: 2994 SUNFLOWER RD
Address 2:
City: LINCOLNVILLE State: KS Zip: 66858 + 9842
Contact Person: Sherry Soyez
Phone: (620) 382-6192
Lease Name: DEFOREST A
Well Number: 1

API No.: 15-115-21018-00-00
Permit No: E24042.1
Reporting Year: 2021
(January 1 to December 31)

____ - E2 - NE - SE Sec. 9 Twp. 22 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
1980 feet from ☐ N / ☑ S Line of Section
495 feet from ☑ E / ☐ W Line of Section
County: Marion

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: 3000 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	15000	0	0	0	30
February	10000	0	0	0	20
March	15500	0	0	0	31
April	15000	0	0	0	30
May	15500	0	0	0	31
June	15000	0	0	0	30
July	15500	0	0	0	31
August	15500	0	0	0	31
September	5000	0	0	0	10
October	15000	0	0	0	30
November	14500	0	0	0	29
December	13500	0	0	0	27
TOTAL	165000		0		

Submitted Electronically