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 # 4871
Name: Curt's Oil Operation, LLC
Address 1: PO BOX 328
Address 2:
City: Hoisington State: KS Zip: 67544 + __ __ __ __
Contact Person: Francis Hitschmann
Phone: (620) 793-2540
Lease Name: BRENN A
Well Number: 4

API No.: 15-009-05758-00-01
Permit No: D05742.0
Reporting Year: 2021
(January 1 to December 31)

____ - NE - SW - SE Sec. 15 Twp. 20 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
987 feet from ☐ N / ☑ S Line of Section
1581 feet from ☑ E / ☐ W Line of Section
County: Barton

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: 31 Additives: _____
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 1000 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	961	0	0	0	31
February	868	0	0	0	28
March	961	0	0	0	31
April	930	0	0	0	30
May	961	0	0	0	31
June	930	0	0	0	30
July	961	0	0	0	31
August	961	0	0	0	31
September	930	0	0	0	30
October	961	0	0	0	31
November	930	0	0	0	30
December	961	0	0	0	31
TOTAL	11315		0		

Submitted Electronically