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 # 30535
Name: Hartman Oil Co., Inc.
Address 1: 10500 E BERKELEY SQ PKWY STE 100
Address 2:
City: WICHITA State: KS Zip: 67206 + 6816
Contact Person: Catherine Hartman
Phone: ( 316 ) 636-2090
Lease Name: DEMEL
Well Number: 2-15

API No.: 15-009-25142-00-01
Permit No: D30318.0
Reporting Year: 2022
*(January 1 to December 31)*

____ - NE - NE - NW Sec. 15 Twp. 17 S. R. 13 ☐ E ☑ W
*(Q/Q/Q/Q)*
4633 feet from ☐ N / ☑ S Line of Section
3189 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: ____ Additives: ____
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 2000 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 | 5522 | 0 | 0 | 0 | 31 |
| February | 1965 | 0 | 0 | 0 | 28 |
| March | 4648 | 0 | 0 | 0 | 31 |
| April | 4411 | 0 | 0 | 0 | 30 |
| May | 2875 | 0 | 0 | 0 | 31 |
| June | 3742 | 0 | 0 | 0 | 30 |
| July | 3897 | 0 | 0 | 0 | 31 |
| August | 4369 | 0 | 0 | 0 | 31 |
| September | 5675 | 0 | 0 | 0 | 30 |
| October | 5620 | 0 | 0 | 0 | 31 |
| November | 5437 | 0 | 0 | 0 | 30 |
| December | 7602 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 55763 | | 0 | | |

Submitted Electronically