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: 2022
(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				20
February	100				20
March	150				30
April	100				20
May	100				20
June	150				30
July	150				30
August	200				30
September	200				30
October	200				30
November	100				20
December	100				20
TOTAL	1650		0		

Submitted Electronically