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 # 5663
Name: Hess Oil Company
Address 1: PO BOX 1009
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 1009
Contact Person: Adrian Morales
Phone: ( 620 ) 241-4640
Lease Name: AKERSON
Well Number: 5

API No.: 15-113-19291-00-01
Permit No: E19281.4
Reporting Year: 2022
*(January 1 to December 31)*

____ - ____ - S2 - NE Sec. 27 Twp. 19 S. R. 2 ☐ E ☑ W
*(Q/Q/Q/Q)*
3309 feet from ☐ N / ☑ S Line of Section
1295 feet from ☑ E / ☐ W Line of Section
County: McPherson

**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: Mississippi
Maximum Authorized Injection Rate: 900 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 5549 | 0 | 0 | 0 | 31 |
| February | 5012 | 0 | 0 | 0 | 28 |
| March | 5549 | 0 | 0 | 0 | 31 |
| April | 5370 | 0 | 0 | 0 | 30 |
| May | 5549 | 0 | 0 | 0 | 31 |
| June | 5370 | 0 | 0 | 0 | 30 |
| July | 5549 | 0 | 0 | 0 | 31 |
| August | 5549 | 0 | 0 | 0 | 31 |
| September | 5370 | 0 | 0 | 0 | 30 |
| October | 5549 | 0 | 0 | 0 | 31 |
| November | 5370 | 0 | 0 | 0 | 30 |
| December | 5549 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 65335 | | 0 | | |

Submitted Electronically