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 # 32485
Name: Patteson, Thomas Wade
Address 1: 484 Osage Trail
Address 2:
City: MOLINE State: KS Zip: 67353 + 9718
Contact Person: Wade Patteson
Phone: (620) 647-3667
Lease Name: MCNOWN
Well Number: 4

API No.: 15-019-40643-00-01
Permit No: E32331.1
Reporting Year: 2022
(January 1 to December 31)

____ - NE - NE - SW Sec. 28 Twp. 32 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
2327 feet from ☐ N / ☑ S Line of Section
2829 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 500 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 3000 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	8680	0			31
February	7840	0			28
March	8680	0			31
April	7000	0			30
May	8680	0			31
June	8400	0			30
July	8680	0			31
August	8680	0			31
September	8400	0			30
October	8680	0			31
November	8400	0			30
December	7840	0			31
TOTAL	99960		0		

Submitted Electronically