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 # 34479
Name: Patterson Operations LLC
Address 1: 2542 N ROSEMONT CT
Address 2:
City: WICHITA State: KS Zip: 67228 + 8022
Contact Person: Garr Patterson
Phone: (316) 651-6104
Lease Name: BROWNING
Well Number: 03

API No.: 15-073-22327-00-00
Permit No: E21058.1
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NE - NE Sec. 19 Twp. 22 S. R. 10 ☑ E ☐ W
(Q/Q/Q/Q)
4803 feet from ☐ N / ☑ S Line of Section
608 feet from ☑ E / ☐ W Line of Section
County: Greenwood

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: 900 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 2500 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	18600	230			31
February	16800	230			28
March	18600	230			31
April	18000	230			30
May	18600	230			31
June	18000	230			30
July	18600	230			31
August	18600	230			31
September	18000	230			30
October	18600	230			31
November	18000	230			30
December	18600	230			31
TOTAL	219000		0		

Submitted Electronically