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 # 8914
Name: H & C Oil Operating Inc.
Address 1: PO BOX 86
Address 2:
City: PLAINVILLE State: KS Zip: 67663 + 0086
Contact Person: Robert Plante
Phone: ( 785 ) 434-7434
Lease Name: GOETZ SWD
Well Number: 1

API No.: 15-179-20754-00-01
Permit No: D23218.0
Reporting Year: 2023
*(January 1 to December 31)*

NW - SE - SE - NE Sec. 11 Twp. 9 S. R. 27 ☐ E ☑ W
*(Q/Q/Q/Q)*
3091 feet from ☐ N / ☑ S Line of Section
460 feet from ☑ E / ☐ W Line of Section
County: Sheridan

**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: Cedar Hills
Maximum Authorized Injection Rate: 1000 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 | 0 | 0 | 0 | 0 | 0 |
| February | 0 | 0 | 0 | 0 | 0 |
| March | 0 | 0 | 0 | 0 | 0 |
| April | 0 | 0 | 0 | 0 | 0 |
| May | 1550 | 0 | 0 | 0 | 31 |
| June | 1880 | 0 | 0 | 0 | 30 |
| July | 2170 | 0 | 0 | 0 | 31 |
| August | 2170 | 0 | 0 | 0 | 31 |
| September | 2100 | 0 | 0 | 0 | 30 |
| October | 2170 | 0 | 0 | 0 | 31 |
| November | 2100 | 0 | 0 | 0 | 30 |
| December | 2170 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 16310 | | 0 | | |

Submitted Electronically