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 # 32846
Name: Premier Oil & Exploration Inc
Address 1: 3 Compound Dr
Address 2:
City: HUTCHINSON State: KS Zip: 67502 + 1916
Contact Person: Kevin Bowen
Phone: ( 620 ) 727-0172
Lease Name: HAGER SWD
Well Number: 1

API No.: 15-159-01485-00-01
Permit No: D23194.0
Reporting Year: 2024
*(January 1 to December 31)*

____ - SW - SW - NW Sec. 33 Twp. 19 S. R. 10 ☐ E ☑ W
*(Q/Q/Q/Q)*
2994 feet from ☐ N / ☑ S Line of Section
4980 feet from ☑ E / ☐ W Line of Section
County: Rice

**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: ARBUCKLE
Maximum Authorized Injection Rate: 5000 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 | 65565 | | | | 31 |
| February | 59220 | | | | 28 |
| March | 65565 | | | | 31 |
| April | 63450 | | | | 30 |
| May | 65565 | | | | 31 |
| June | 63450 | | | | 30 |
| July | 65565 | | | | 31 |
| August | 65565 | | | | 31 |
| September | 63450 | | | | 30 |
| October | 65565 | | | | 31 |
| November | 63450 | | | | 30 |
| December | 65565 | | | | 31 |
| ***TOTAL*** | 771975 | | 0 | | |

Submitted Electronically