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 # 32158
Name: H & B Petroleum Corp.
Address 1: PO BOX 1305
Address 2:
City: HUTCHINSON State: KS Zip: 67504 + 1305
Contact Person: Mike Hammersmith
Phone: (620) 2596713
Lease Name: STUCKY A
Well Number: 1

API No.: 15-171-20228-00-01
Permit No: D31952.0
Reporting Year: 2024
(January 1 to December 31)

NW - SE - SW - SW Sec. 23 Twp. 19 S. R. 31 ☐ E ☑ W
(Q/Q/Q/Q)
331 feet from ☐ N / ☑ S Line of Section
4311 feet from ☑ E / ☐ W Line of Section
County: Scott

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,MISSISSIPPIAN,SIMPSON,VIOLA
Maximum Authorized Injection Rate: 2000 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
February	0	0			0
March	0	0			0
April	0	0			0
May	0	0			0
June	0	0			0
July	0	0			0
August	0	0			0
September	0	0			0
October	0	0			0
November	0	0			0
December	0	0			0
TOTAL	0		0		

Submitted Electronically