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 # 32693
Name: Hawkins Oil, LLC
Address 1: 427 S BOSTON AVE STE 915
Address 2:
City: TULSA State: OK Zip: 74103 + 4114
Contact Person: Dan Flowers
Phone: (918) 382-7743
Lease Name: W ROBISON
Well Number: 16

API No.: 15-015-40374-00-01
Permit No: E27578.1
Reporting Year: 2024
(January 1 to December 31)

____ - NW - SE - SE Sec. 18 Twp. 25 S. R. 5 ☑ E ☐ W
(Q/Q/Q/Q)
981 feet from ☐ N / ☑ S Line of Section
978 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 1200 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 1200 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	2325	550			31
February	2100	550			28
March	2235	550			31
April	2100	550			30
May	2235	550			31
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	10995		0		

Submitted Electronically