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 # 5663
Name: Hess Oil Company
Address 1: PO BOX 1009
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 1009
Contact Person: Adrian Morales
Phone: (620) 241-4640
Lease Name: RISHEL
Well Number: B3

API No.: 15-113-01259-00-02
Permit No: E19281.2
Reporting Year: 2025
(January 1 to December 31)

____ - NE - SE - SW Sec. 27 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
971 feet from ☐ N / ☑ S Line of Section
3045 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: Mississippi
Maximum Authorized Injection Rate: 900 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	5572	0	0	0	28
February	5572	0	0	0	28
March	5174	0	0	0	26
April	5970	0	0	0	30
May	6169	0	0	0	31
June	5970	0	0	0	30
July	6169	0	0	0	31
August	6169	0	0	0	31
September	5970	0	0	0	30
October	5970	0	0	0	30
November	5970	0	0	0	30
December	6169	0	0	0	31
TOTAL	70844		0		

Submitted Electronically