



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1342632

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 # 31488
Name: George, Mark
Address 1: 817 C ST
Address 2: _____
City: LEROY State: KS Zip: 66857 + 9522
Contact Person: mak george
Phone: (620) 363-0250
Lease Name: GRAHAM
Well Number: 2

API No.: 15-031-20663-00-01
Permit No: E30045.1
Reporting Year: 2016
(January 1 to December 31)
____ - NW - SW - NW Sec. 13 Twp. 23 S. R. 16 ☒ E ☐ W
(a/a/a/a)
3727 feet from ☐ N / ☒ S Line of Section
4823 feet from ☒ E / ☐ W Line of Section
County: Coffey

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: 500 psi Injection Zone: SQUIRREL
Maximum Authorized Injection Rate: 80 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	<u>750</u>	<u>30</u>	<u>0</u>		<u>31</u>
	February	<u>750</u>	<u>30</u>	<u>0</u>		<u>28</u>
	March	<u>750</u>	<u>30</u>	<u>0</u>		<u>30</u>
	April	<u>750</u>	<u>30</u>	<u>0</u>		<u>30</u>
	May	<u>750</u>	<u>30</u>	<u>0</u>		<u>31</u>
	June	<u>750</u>	<u>30</u>	<u>0</u>		<u>30</u>
	July	<u>750</u>	<u>30</u>	<u>0</u>		<u>31</u>
	August	<u>750</u>	<u>30</u>	<u>0</u>		<u>30</u>
	September	<u>0</u>		<u>0</u>		
	October	<u>0</u>		<u>0</u>		
	November	<u>0</u>		<u>0</u>		
	December	<u>0</u>		<u>0</u>		
	TOTAL	<u>6000</u>		<u>0</u>		

Submitted Electronically