1344900

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 # 3263
Name: Gideon, Darold H. dba Gideon Oil Operations
Address 1: 93 S. MAIN ST.
Address 2:
City: RUSSELL State: KS Zip: 67665 + 2901
Contact Person: Darold Gideon
Phone: (785) 324-0406
Lease Name: MACHIN NORTH
Well Number: 1

API No.: 15-167-23016-00-01
Permit No: E27625.1
Reporting Year: 2016
(January 1 to December 31)

____ - NE - NW - NE Sec. 4 Twp. 13 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
4997 feet from ☐ N / ☑ S Line of Section
1830 feet from ☑ E / ☐ W Line of Section
County: Russell

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: 200 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 250 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	1200	0	0		31
February	1100	0	0		28
March	1240	0	0		31
April	1240	0	0		30
May	1280	0	0		31
June	1220	0	0		30
July	1240	0	0		31
August	1200	0	0		31
September	1140	0	0		30
October	1200	0	0		31
November	1200	0	0		30
December	1240	0	0		31
TOTAL	14500		0		

Submitted Electronically