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 # 9386
Name: Gus Jones Cable Tool Service, LLC
Address 1: 149 RD 25
Address 2:
City: ELK CITY State: KS Zip: 67344 + __ __ __ __
Contact Person: Gus Jones
Phone: (620) 332-7637
Lease Name: KILL (O'NEAL)
Well Number: 1 A

API No.: 15-049-21652-00-02
Permit No: E31930.1
Reporting Year: 2017
(January 1 to December 31)

SE - SW - NE - NW Sec. 34 Twp. 31 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4172 feet from ☐ N / ☑ S Line of Section
3353 feet from ☑ E / ☐ W Line of Section
County: Elk

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: LAYTON
Maximum Authorized Injection Rate: 200 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	1500	200	0		31
February	1500	200	0		28
March	1500	200	0		31
April	1500	200	0		30
May	1500	200	0		31
June	1500	200	0		30
July	1500	200	0		31
August	1500	200	0		31
September	1500	200	0		30
October	1500	200	0		31
November	1500	200	0		30
December	1500	200	0		31
TOTAL	18000		0		

Submitted Electronically