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 # 3288
Name: Jody Oil & Gas Corporation
Address 1: PO BOX 422
Address 2:
City: ATTICA State: KS Zip: 67009 + 0422
Contact Person: Derek Newberry
Phone: (620) 254-7251
Lease Name: YATES
Well Number: 1

API No.: 15-077-00144-00-01
Permit No: D27827.0
Reporting Year: 2017
(January 1 to December 31)

____ - NE - NW - SE Sec. 18 Twp. 31 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
2268 feet from ☐ N / ☑ S Line of Section
1648 feet from ☑ E / ☐ W Line of Section
County: Harper

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: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	21700	-25	0		31
February	19600	-25	0		28
March	23250	-25	0		31
April	22500	-25	0		30
May	23250	-25	0		31
June	22500	-25	0		30
July	23250	-25	0		31
August	23250	-25	0		31
September	22500	-25	0		30
October	23000	-25	0		31
November	22000	-25	0		30
December	23250	-25	0		31
TOTAL	270050		0		

Submitted Electronically