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 # 31019
Name: Diamond Star Oil, Inc.
Address 1: 219 BROOKSIDE DR
Address 2:
City: PAOLA State: KS Zip: 66071 + 1111
Contact Person: John Paulsen
Phone: ( 913 ) 731-5646
Lease Name: MOSHER
Well Number: 20 A

API No.: 15-121-23551-00-01
Permit No: E25207.5
Reporting Year: 2017
*(January 1 to December 31)*

____ - SE - SW - NW Sec. 1 Twp. 16 S. R. 21 ☑ E ☐ W
*(Q/Q/Q/Q)*
2970 feet from ☐ N / ☑ S Line of Section
4555 feet from ☑ E / ☐ W Line of Section
County: Miami

**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: 550 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 100 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 | 342 | 500 | 0 | | 31 |
| February | 303 | 500 | 0 | | 28 |
| March | 337 | 500 | 0 | | 31 |
| April | 321 | 500 | 0 | | 30 |
| May | 334 | 500 | 0 | | 31 |
| June | 316 | 500 | 0 | | 30 |
| July | 322 | 500 | 0 | | 31 |
| August | 325 | 500 | 0 | | 31 |
| September | 311 | 500 | 0 | | 30 |
| October | 318 | 500 | 0 | | 31 |
| November | 309 | 500 | 0 | | 30 |
| December | 313 | 500 | 0 | | 31 |
| ***TOTAL*** | 3851 | | 0 | | |

Submitted Electronically