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 # 31955
Name: Mark Oil, Inc.
Address 1: 21825 GREENWOOD RD
Address 2: PO BOX 511
City: CHANUTE State: KS Zip: 66720 + 0511
Contact Person: Greg Lair
Phone: (620) 431-3002
Lease Name: ALBERT R
Well Number: 7

API No.: 15-207-23378-00-01
Permit No: E26912.1
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - ____ - NE Sec. 8 Twp. 24 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
5130 feet from ☐ N / ☑ S Line of Section
150 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: Mississippi
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	280	150	0		31
February	255	150	0		28
March	280	150	0		31
April	275	150	0		30
May	280	150	0		31
June	275	150	0		30
July	280	150	0		31
August	280	150	0		31
September	275	150	0		30
October	280	150	0		31
November	275	150	0		30
December	280	150	0		31
TOTAL	3315		0		

Submitted Electronically