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 # 5217
Name: Koehn, Radell W. and Austin Koehn & Morgan Koehn
Address 1: 1977 MOCCASIN RD
Address 2:
City: GALVA State: KS Zip: 67443 + 8021
Contact Person: Radell Koehn
Phone: (620) 654-3872
Lease Name: MILLER
Well Number: 4

API No.: 15-113-01454-00-00
Permit No: E25176.1
Reporting Year: 2017
(January 1 to December 31)

SE - SW - SW - SE Sec. 24 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
263 feet from ☐ N / ☑ S Line of Section
2174 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: MISSISSIPPIAN
Maximum Authorized Injection Rate: 2500 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	53319	0	0		31
February	48160	0	0		28
March	53327	0	0		31
April	51597	0	0		30
May	53323	0	0		31
June	51593	0	0		30
July	53323	0	0		31
August	53302	0	0		31
September	51603	0	0		30
October	53324	0	0		31
November	51605	0	0		30
December	53307	0	0		31
TOTAL	627783		0		

Submitted Electronically