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 # 35346
Name: Marshall Oil, LLC
Address 1: 304 E. 9TH ST.
Address 2: PO BOX 389
City: EUREKA State: KS Zip: 67045 + ___ ___ ___ ___
Contact Person: Bryan Marshall
Phone: (620) 750-0058
Lease Name: DON ELLISON
Well Number: 2

API No.: 15-207-25824-00-00
Permit No: E25866.5
Reporting Year: 2017
(January 1 to December 31)

SW - NW - SW - SE Sec. 10 Twp. 26 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
800 feet from ☐ N / ☑ S Line of Section
2603 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: 600 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	5870	200	0		31
February	5500	200	0		28
March	5800	200	0		31
April	5500	200	0		30
May	5700	200	0		31
June	5600	200	0		30
July	5800	200	0		31
August	5700	200	0		31
September	5750	200	0		30
October	5800	200	0		31
November	5600	200	0		30
December	5800	200	0		31
TOTAL	68420		0		

Submitted Electronically