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: MORRIS
Well Number: 6

API No.: 15-205-20829-00-01
Permit No: E27922.1
Reporting Year: 2017
(January 1 to December 31)

___ - NE - SW - NW Sec. 3 Twp. 30 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
3583 feet from ☐ N / ☑ S Line of Section
4328 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: BARTLESVILLE
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	1500	100	0		31
February	1400	100	0		28
March	1500	100	0		31
April	1525	100	0		30
May	1545	100	0		31
June	1475	100	0		30
July	1425	100	0		31
August	1430	100	0		31
September	1545	100	0		30
October	1450	100	0		31
November	1425	100	0		30
December	1545	100	0		31
TOTAL	17765		0		

Submitted Electronically