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 # 5088
Name: Darrah, John Jay, Jr.
Address 1: P.O. BOX 2786
Address 2:
City: WICHITA State: KS Zip: 67201 + 2786
Contact Person: Will Darrah
Phone: (316) 219-3390
Lease Name: HAMBURG
Well Number: 6

API No.: 15-195-21839-00-01
Permit No: D26357.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - ____ - S2 Sec. 11 Twp. 13 S. R. 21 ☐ E ☑ W
(Q/Q/Q/Q)
1345 feet from ☐ N / ☑ S Line of Section
2735 feet from ☑ E / ☐ W Line of Section
County: Trego

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: ARB
Maximum Authorized Injection Rate: 3000 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	4799	170	0		31
February	4335	171	0		28
March	4799	171	0		31
April	4644	171	0		30
May	7199	169	0		31
June	4335	171	0		28
July	4490	171	0		29
August	4335	171	0		28
September	4644	171	0		30
October	4799	171	0		31
November	4644	171	0		30
December	4799	171	0		31
TOTAL	57822		0		

Submitted Electronically