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 # 35492
Name: ABS Oil, Inc.
Address 1: 1396 VIOLET RD
Address 2:
City: PIQUA State: KS Zip: 66761 + __ __ __ __
Contact Person: Adam
Phone: (785) 448-8620
Lease Name: CONGER
Well Number: W I 2

API No.: 15-207-25594-00-00
Permit No: E23990.2
Reporting Year: 2017
(January 1 to December 31)

SW - SE - NE - NE (Q/Q/Q/Q) Sec. 14 Twp. 24 S. R. 15 ☑ E ☐ W
4150 feet from ☐ N / ☑ S Line of Section
445 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: 750 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 500 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 3 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	0		0		
February	0		0		
March	0		0		
April	0		0		
May	0		0		
June	0		0		
July	0		0		
August	0		0		
September	0		0		
October	645	650	0		31
November	625	650	0		30
December	645	650	0		31
TOTAL	1915		0		

Submitted Electronically