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 # 6037
Name: Staab Oil Co., a General Partnership
Address 1: 1607 HOPEWELL RD
Address 2:
City: HAYS State: KS Zip: 67601 + 9443
Contact Person: Francis C. Staab
Phone: (785) 625-5013
Lease Name: HERMAN
Well Number: 6

API No.: 15-065-01030-00-02
Permit No: D30617.0
Reporting Year: 2017
(January 1 to December 31)

____ - ____ - NW - SW Sec. 9 Twp. 10 S. R. 24 ☐ E ☑ W
(Q/Q/Q/Q)
1976 feet from ☐ N / ☑ S Line of Section
4659 feet from ☑ E / ☐ W Line of Section
County: Graham

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: CEDAR HILLS
Maximum Authorized Injection Rate: 500 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	30	0	0		31
February	20	0	0		28
March	30	0	0		31
April	25	0	0		30
May	30	0	0		31
June	30	0	0		30
July	30	0	0		31
August	30	0	0		31
September	25	0	0		30
October	30	0	0		31
November	30	0	0		30
December	30	0	0		31
TOTAL	340		0		

Submitted Electronically