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 # 35217
Name: MB Holdings LLC
Address 1: 2951 CR 2000
Address 2:
City: INDEPENDENCE State: KS Zip: 67301 + __ __ __ __
Contact Person: Bryan Allen
Phone: (620) 870-1660
Lease Name: GILLMAN
Well Number: W 1

API No.: 15-125-24535-00-00
Permit No: E21190.1
Reporting Year: 2017
(January 1 to December 31)

SE - NW - SE - NW Sec. 24 Twp. 34 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
3322 feet from ☐ N / ☑ S Line of Section
3330 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: 100 psi Injection Zone: Wayside
Maximum Authorized Injection Rate: 75 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	1950	100	0		31
February	1904	100	0		28
March	2108	100	0		31
April	2070	100	0		30
May	2139	100	0		31
June	1770	100	0		30
July	2170	100	0		31
August	2139	100	0		31
September	2040	100	0		30
October	2077	100	0		31
November	1950	100	0		30
December	2108	100	0		31
TOTAL	24425		0		

Submitted Electronically