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 # 34172
Name: J. D. & M., Inc.
Address 1: 5130 CR 5600
Address 2:
City: CHERRYVALE State: KS Zip: 67335 + __ __ __ __
Contact Person: Dawn Matlock
Phone: (620) 205-9758
Lease Name: BECKLEY
Well Number: 5

API No.: 15-125-01950-00-01
Permit No: E18071.1
Reporting Year: 2017
(January 1 to December 31)

NW - NE - SW - SW Sec. 30 Twp. 31 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
990 feet from ☐ N / ☑ S Line of Section
4520 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: 750 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 200 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	5	50	0		31
February	5	50	0		29
March	5	50	0		31
April	5	50	0		30
May	5	50	0		31
June	5	50	0		30
July	5	50	0		31
August	5	50	0		31
September	5	50	0		30
October	5	50	0		31
November	5	50	0		30
December	5	50	0		3
TOTAL	60		0		

Submitted Electronically