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 # 35368
Name: Jones Oil Exploration, LLC
Address 1: PO BOX 68
Address 2:
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: Matt Jones
Phone: (620) 725-3636
Lease Name: HOFFMAN
Well Number: 4

API No.: 15-125-28429-00-01
Permit No: D27745.0
Reporting Year: 2018
(January 1 to December 31)

____ - NE - SE - NE Sec. 4 Twp. 33 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
3610 feet from ☐ N / ☑ S Line of Section
556 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: 300 psi Injection Zone: Weiser
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	60	0	0	0	31
February	60	0	0	0	28
March	60	0	0	0	31
April	60	0	0	0	30
May	60	0	0	0	31
June	60	0	0	0	30
July	60	0	0	0	31
August	60	0	0	0	31
September	60	0	0	0	30
October	60	0	0	0	31
November	60	0	0	0	30
December	60	0	0	0	31
TOTAL	720		0		

Submitted Electronically