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 # 31955
Name: Mark Oil, Inc.
Address 1: 21825 GREENWOOD RD
Address 2: PO BOX 511
City: CHANUTE State: KS Zip: 66720 + 0511
Contact Person: Greg Lair
Phone: (620) 431-3002
Lease Name: ALBERT R
Well Number: 7

API No.: 15-207-23378-00-01
Permit No: E26912.1
Reporting Year: 2018
(January 1 to December 31)

____ - NE - NE - NE Sec. 8 Twp. 24 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
5089 feet from ☐ N / ☑ S Line of Section
160 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: 200 psi Injection Zone: Mississippi
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	310	150			31
February	280	150			28
March	310	150			31
April	305	150			30
May	310	150			31
June	305	150			30
July	310	150			31
August	310	150			31
September	305	150			30
October	310	150			31
November	305	150			30
December	310	150			31
TOTAL	3670		0		

Submitted Electronically