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 # 30116
Name: Jones Oil, LLC
Address 1: 112 N GRAY
Address 2:
City: ST JOHN State: KS Zip: 67576 + 1923
Contact Person: STEVE JONES
Phone: (620) 546-3856
Lease Name: BOOKSTORE
Well Number: 4

API No.: 15-185-23867-00-00
Permit No: D31959.0
Reporting Year: 2018
(January 1 to December 31)

NW - SE - NE - SE Sec. 2 Twp. 24 S. R. 14 ☐ E ☑ W
(Q/Q/Q/Q)
1902 feet from ☐ N / ☑ S Line of Section
380 feet from ☑ E / ☐ W Line of Section
County: Stafford

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: ARBUCKLE
Maximum Authorized Injection Rate: 10000 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	1924	0	0		31
February	1980	0	0		28
March	1836	0	0		31
April	1680	0	0		30
May	1767	0	0		31
June	2100	0	0		30
July	1998	0	0		31
August	1988	0	0		31
September	1970	0	0		30
October	1955	0	0		31
November	1760	0	0		30
December	2104	0	0		31
TOTAL	23062		0		

Submitted Electronically