

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 # 5088
Name: Darrah, John Jay, Jr.
Address 1: P.O. BOX 2786
Address 2: _____
City: WICHITA State: KS Zip: 67201 + 2786
Contact Person: Chris Millard
Phone: (316) 219-3390
Lease Name: HOFFMAN A
Well Number: 7

API No.: 15-009-19069-00-01
Permit No.: D00923.0
Reporting Year: 2018
(January 1 to December 31)
____ - NW - SE - NE Sec. 1 Twp. 16 S. R. 14 ☐ E ☒ W
(a/a/a/a)
3436 feet from ☐ N / ☒ S Line of Section
898 feet from ☒ E / ☐ W Line of Section
County: Barton

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: REAGAN, ARBUCKLE LOWER
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	<u>16000</u>		<u>0</u>		<u>30</u>
	February	<u>17500</u>		<u>0</u>		<u>28</u>
	March	<u>16800</u>		<u>0</u>		<u>31</u>
	April	<u>15600</u>		<u>0</u>		<u>30</u>
	May	<u>15600</u>		<u>0</u>		<u>31</u>
	June	<u>17800</u>		<u>0</u>		<u>30</u>
	July	<u>16850</u>		<u>0</u>		<u>31</u>
	August	<u>17400</u>		<u>0</u>		<u>31</u>
	September	<u>16825</u>		<u>0</u>		<u>30</u>
	October	<u>17000</u>		<u>0</u>		<u>30</u>
	November	<u>16050</u>		<u>0</u>		<u>30</u>
	December	<u>17450</u>		<u>0</u>		<u>31</u>
	TOTAL	<u>200875</u>		<u>0</u>		

Submitted Electronically