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: P. JONES
Well Number: 3

API No.: 15-151-20910-00-02
Permit No: D30598.0
Reporting Year: 2018
(January 1 to December 31)

____ - W2 - SE - SW Sec. 13 Twp. 28 S. R. 13 ☐ E ☑ W
(Q/Q/Q/Q)
665 feet from ☐ N / ☑ S Line of Section
1614 feet from ☐ E / ☑ W Line of Section
County: Pratt

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: 2500 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	0				
February	0				
March	0				
April	0				
May	0				
June	0				
July	0				
August	0				
September	0				
October	12500	0	0		25
November	15000	0	0		30
December	15550	0	0		31
TOTAL	43050		0		

Submitted Electronically