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 # 35346
Name: Marshall Oil, LLC
Address 1: 304 E. 9TH ST.
Address 2: PO BOX 389
City: EUREKA State: KS Zip: 67045 + __ __ __ __
Contact Person: Bryan Marshall
Phone: (620) 750-0058
Lease Name: MORRIS
Well Number: 6

API No.: 15-205-20829-00-01
Permit No: E27922.1
Reporting Year: 2018
(January 1 to December 31)

____ - NE - SW - NW Sec. 3 Twp. 30 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
3525 feet from ☐ N / ☑ S Line of Section
4382 feet from ☑ E / ☐ W Line of Section
County: Wilson

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: 600 psi Injection Zone: BARTLESVILLE
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	1500	100			31
February	1200	100			28
March	1500	100			31
April	1500	100			30
May	1400	100			31
June	1400	100			30
July	1400	100			31
August	1500	100			30
September	1500	100			30
October	1400	100			31
November	1400	100			30
December	1500	0			31
TOTAL	17200		0		

Submitted Electronically