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: ORLAND NEWBY
Well Number: 4

API No.: 15-205-21426-00-00
Permit No: D20758.0
Reporting Year: 2018
(January 1 to December 31)

SW - SW - SW - SE Sec. 3 Twp. 30 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
53 feet from ☐ N / ☑ S Line of Section
2397 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: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 150 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	3900	0			31
February	3700	0			28
March	3800	0			31
April	3700	0			30
May	3700	0			31
June	3600	0			30
July	3900	0			31
August	3900	0			31
September	3700	0			30
October	3800	0			31
November	3700	0			30
December	3800	0			31
TOTAL	45200		0		

Submitted Electronically