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 # 32079
Name: Leis, John E.
Address 1: 1188 NIGHTHAWK RD.
Address 2:
City: YATES CENTER State: KS Zip: 66783 + __ __ __ __
Contact Person: John Leis
Phone: (620) 625-3676
Lease Name: WEIDE
Well Number: T-3

API No.: 15-207-25820-00-01
Permit No: D27763.0
Reporting Year: 2018
(January 1 to December 31)

SE - SW - NW - SW Sec. 32 Twp. 23 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
1650 feet from ☐ N / ☑ S Line of Section
4850 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 300 psi Injection Zone: LANSING-KANSAS CITY
Maximum Authorized Injection Rate: 60 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	310	0			31
February	280	0			28
March	310	0			31
April	300	0			30
May	310	0			31
June	300	0			30
July	310	0			31
August	310	0			31
September	300	0			30
October	310	0			31
November	300	0			30
December	310	0			31
TOTAL	3650		0		

Submitted Electronically