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 # 32361
Name: Krehbiel, Hal Gene and Alice dba K-Bar Oil
Address 1: 1219 TURKEY CREEK DR
Address 2:
City: MCPHERSON State: KS Zip: 67460 + 9765
Contact Person: Hal G. Krehbiel
Phone: (620) 242-6624
Lease Name: PANNING
Well Number: 3

API No.: 15-009-24793-00-00
Permit No: D28402.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NW - SE Sec. 10 Twp. 20 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
1779 feet from ☐ N / ☑ S Line of Section
2557 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: 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	51929	0	0		31
February	46970	0	0		28
March	51922	0	0		31
April	50238	0	0		30
May	51926	0	0		31
June	50253	0	0		30
July	51930	0	0		31
August	51933	0	0		31
September	50258	0	0		30
October	51929	0	0		31
November	50255		0		30
December	51927	0	0		31
TOTAL	611470		0		

Submitted Electronically