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 # 35368
Name: Jones Oil Exploration, LLC
Address 1: PO BOX 68
Address 2:
City: SEDAN State: KS Zip: 67361 + 0068
Contact Person: Matt Jones
Phone: (620) 725-3636
Lease Name: MCMILLAN
Well Number: 47

API No.: 15-019-24665-00-01
Permit No: E03221.4
Reporting Year: 2019
(January 1 to December 31)

____ - SW - NW - NW Sec. 27 Twp. 34 S. R. 12 ☑ E ☐ W
(Q/Q/Q/Q)
4162 feet from ☐ N / ☑ S Line of Section
4867 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 500 psi Injection Zone: WAYSIDE SAND
Maximum Authorized Injection Rate: 300 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	6820	300	0	0	31
February	6160	300	0	0	28
March	6820	300	0	0	31
April	6600	300	0	0	30
May	6820	300	0	0	31
June	6600	300	0	0	30
July	6820	300	0	0	31
August	6820	300	0	0	31
September	6600	300	0	0	30
October	6820	300	0	0	31
November	6600	300	0	0	30
December	6820	300	0	0	31
TOTAL	80300		0		

Submitted Electronically