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 + 0389
Contact Person: Bryan Marshall
Phone: (620) 750-0058
Lease Name: SQUIRE LOIS
Well Number: 3

API No.: 15-207-25691-00-00
Permit No: E25866.3
Reporting Year: 2019
(January 1 to December 31)

SE - SW - SE - SW Sec. 10 Twp. 26 S. R. 17 ☑ E ☐ W
(Q/Q/Q/Q)
166 feet from ☐ N / ☑ S Line of Section
3435 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: 600 psi Injection Zone: CATTLEMAN SAND
Maximum Authorized Injection Rate: 300 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 4 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	6000	200			31
February	5500	200			28
March	6000	200			31
April	5900	200			30
May	5800	200			31
June	5700	200			30
July	6000	200			31
August	5900	200			31
September	5700	200			30
October	5900	200			31
November	5700	200			30
December	6000	200			31
TOTAL	70100		0		

Submitted Electronically