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 # 34303
Name: Jordan Oil Management Inc.
Address 1: P.O. BOX 642
Address 2:
City: WELLINGTON State: KS Zip: 67152 + 0642
Contact Person: Jason Bruns
Phone: (620) 440-0170
Lease Name: NEWCOMER
Well Number: 1B

API No.: 15-173-00089-00-01
Permit No: D28414.0
Reporting Year: 2019
(January 1 to December 31)

SW - SW - NW - ____ Sec. 35 Twp. 25 S. R. 1 ☑ E ☐ W
(Q/Q/Q/Q)
2920 feet from ☐ N / ☑ S Line of Section
5128 feet from ☑ E / ☐ W Line of Section
County: Sedgwick

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☐ Untreated Brine ☑ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: na mg/l Specific Gravity: na Additives: na
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: Arbuckle
Maximum Authorized Injection Rate: 2000 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	0	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	2000	0	0	0	31
September	0	0	0	0	30
October	2000	0	0	0	31
November	0	0	0	0	0
December	2250	0	0	0	15
TOTAL	6250		0		

Submitted Electronically