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 # 31504
Name: Strube, Kurt J. dba K.J.S. Oil
Address 1: 600 7th Street
Address 2:
City: CLAFLIN State: KS Zip: 67525 + 8912
Contact Person: Kurt Strube
Phone: (620) 793-2046
Lease Name: LENA
Well Number: 3

API No.: 15-009-23576-00-00
Permit No: D23432.0
Reporting Year: 2019
(January 1 to December 31)

____ - SW - SW - NE Sec. 27 Twp. 16 S. R. 11 ☐ E ☑ W
(Q/Q/Q/Q)
3101 feet from ☐ N / ☑ S Line of Section
2335 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: 57000 mg/l Specific Gravity: 1.070 Additives: acid soap
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 0 psi Injection Zone: ARBUCKLE
Maximum Authorized Injection Rate: 1750 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 0 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	2130	0	0	0	31
February	2500	0	0	0	29
March	1980	0	0	0	31
April	2140	0	0	0	30
May	1700	0	0	0	31
June	1680	0	0	0	30
July	1770	0	0	0	31
August	1785	0	0	0	31
September	1840	0	0	0	30
October	2140	0	0	0	31
November	2270	0	0	0	30
December	1780	0	0	0	31
TOTAL	23715		0		

Submitted Electronically