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: JOY
Well Number: 7-B

API No.: 15-125-29700-00-01
Permit No: D32364.0
Reporting Year: 2020
(January 1 to December 31)

____ - NW - NE - NE Sec. 5 Twp. 33 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
4771 feet from ☐ N / ☑ S Line of Section
744 feet from ☑ E / ☐ W Line of Section
County: Montgomery

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: 700 psi Injection Zone: BARTLESVILLE
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	2170	450	0	0	31
February	2030	450	0	0	29
March	2170	450	0	0	31
April	2100	450	0	0	30
May	2170	450	0	0	31
June	2100	450	0	0	30
July	2170	450	0	0	31
August	2170	450	0	0	31
September	2100	450	0	0	30
October	2170	450	0	0	31
November	2100	450	0	0	30
December	2170	450	0	0	31
TOTAL	25620		0		

Submitted Electronically