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 # 35492
Name: ABS Oil, Inc.
Address 1: 1396 VIOLET RD
Address 2:
City: PIQUA State: KS Zip: 66761 + 1638
Contact Person: Adam Splechter
Phone: (785) 448-8620
Lease Name: CONGER
Well Number: W I 3

API No.: 15-207-25595-00-00
Permit No: E23990.3
Reporting Year: 2020
(January 1 to December 31)

____ - SE - NW - NE Sec. 14 Twp. 24 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
4504 feet from ☐ N / ☑ S Line of Section
1907 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: 750 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 500 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	300	650			31
February	285	650			29
March	325	650			31
April	305	650			30
May	315	650			31
June	302	650			30
July	315	650			31
August	50	650			5
September	48	650			5
October	318	650			31
November	325	650			30
December	298	650			31
TOTAL	3186		0		

Submitted Electronically