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 # 5217
Name: Koehn, Radell W. and Austin Koehn & Morgan Koehn
Address 1: 1977 MOCCASIN RD
Address 2:
City: GALVA State: KS Zip: 67443 + 8021
Contact Person: Radell Koehn
Phone: (620) 654-3872
Lease Name: MILLER
Well Number: 4

API No.: 15-113-01454-00-00
Permit No: E25176.1
Reporting Year: 2020
(January 1 to December 31)

SE - SW - SW - SE Sec. 24 Twp. 19 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
263 feet from ☐ N / ☑ S Line of Section
2174 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 0 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 2500 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	53320				31
February	48176				29
March	53333				31
April	51597				30
May	53322				31
June	51596				30
July	53320				31
August	53303				31
September	51604				30
October	53320				31
November	51609				30
December	53305				31
TOTAL	627805		0		

Submitted Electronically