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 # 3288
Name: Jody Oil & Gas Corporation
Address 1: PO BOX 422
Address 2:
City: ATTICA State: KS Zip: 67009 + 0422
Contact Person: Dustin Newberry
Phone: (620) 254-7251
Lease Name: JACOBS
Well Number: 1

API No.: 15-077-20494-00-01
Permit No: D28247.0
Reporting Year: 2020
(January 1 to December 31)

____ - SE - SW - SE Sec. 26 Twp. 31 S. R. 9 ☐ E ☑ W
(Q/Q/Q/Q)
330 feet from ☐ N / ☑ S Line of Section
1650 feet from ☑ E / ☐ W Line of Section
County: Harper

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: 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	58840				31
February	46178				29
March	58840				31
April	57200				30
May	58840				31
June	57200				30
July	58840				31
August	58840				31
September	57200				30
October	58840				31
November	57200				30
December	58840				31
TOTAL	686858		0		

Submitted Electronically