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 # 9346
Name: Diehl Oil Inc
Address 1: 205 E 13TH
Address 2: PO BOX 234
City: HAYS State: KS Zip: 67601 + 0234
Contact Person: Magen Kroetsch
Phone: (785) 625-6711
Lease Name: MILLER, LOIS H
Well Number: 3

API No.: 15-083-19004-00-01
Permit No: D06343.0
Reporting Year: 2020
(January 1 to December 31)

____ - SW - SE - NE Sec. 36 Twp. 23 S. R. 22 ☐ E ☑ W
(Q/Q/Q/Q)
3283 feet from ☐ N / ☑ S Line of Section
1166 feet from ☑ E / ☐ W Line of Section
County: Hodgeman

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: 50 psi Injection Zone: CEDAR HILLS
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	373	0	0	0	31
February	221	0	0	0	29
March	423	0	0	0	31
April	273	0	0	0	30
May	327	0	0	0	31
June	183	0	0	0	30
July	306	0	0	0	31
August	262	0	0	0	31
September	233	0	0	0	30
October	309	0	0	0	31
November	290	0	0	0	30
December	256	0	0	0	31
TOTAL	3456		0		

Submitted Electronically