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 # 35346
Name: Marshall Oil, LLC
Address 1: 304 E. 9TH ST.
Address 2: PO BOX 389
City: EUREKA State: KS Zip: 67045 + 0389
Contact Person: Jarred Leis
Phone: ( 620 ) 750-0058
Lease Name: MORRIS
Well Number: 6

API No.: 15-205-20829-00-01
Permit No: E27922.1
Reporting Year: 2020
*(January 1 to December 31)*

____ - NE - SW - NW Sec. 3 Twp. 30 S. R. 15 ☑ E ☐ W
*(Q/Q/Q/Q)*
3525 feet from ☐ N / ☑ S Line of Section
4382 feet from ☑ E / ☐ W Line of Section
County: Wilson

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: NONE
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 600 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 1500 | 100 | 0 | 0 | 31 |
| February | 1200 | 100 | 0 | 0 | 28 |
| March | 1500 | 100 | 0 | 0 | 30 |
| April | 1500 | 100 | 0 | 0 | 30 |
| May | 1400 | 100 | 0 | 0 | 31 |
| June | 1400 | 100 | 0 | 0 | 30 |
| July | 1400 | 100 | 0 | 0 | 31 |
| August | 1500 | 100 | 0 | 0 | 30 |
| September | 1500 | 100 | 0 | 0 | 30 |
| October | 1400 | 100 | 0 | 0 | 31 |
| November | 1400 | 100 | 0 | 0 | 30 |
| December | 1500 | 100 | 0 | 0 | 31 |
| ***TOTAL*** | 17200 | | 0 | | |

Submitted Electronically