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 # 31955
Name: Mark Oil, Inc.
Address 1: 21825 GREENWOOD RD
Address 2: PO BOX 511
City: CHANUTE State: KS Zip: 66720 + 0511
Contact Person: Greg Lair
Phone: ( 620 ) 431-3002
Lease Name: ALBERT R
Well Number: 7

API No.: 15-207-23378-00-01
Permit No: E26912.1
Reporting Year: 2020
*(January 1 to December 31)*

____ - NE - NE - NE Sec. 8 Twp. 24 S. R. 17 ☑ E ☐ W
*(Q/Q/Q/Q)*
5089 feet from ☐ N / ☑ S Line of Section
160 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: 200 psi Injection Zone: Mississippi
Maximum Authorized Injection Rate: 100 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 | 310 | 150 | 0 | 0 | 31 |
| February | 290 | 150 | 0 | 0 | 29 |
| March | 310 | 150 | 0 | 0 | 31 |
| April | 305 | 150 | 0 | 0 | 30 |
| May | 310 | 150 | 0 | 0 | 31 |
| June | 305 | 150 | 0 | 0 | 30 |
| July | 310 | 150 | 0 | 0 | 31 |
| August | 310 | 150 | 0 | 0 | 31 |
| September | 305 | 150 | 0 | 0 | 30 |
| October | 310 | 150 | 0 | 0 | 31 |
| November | 305 | 150 | 0 | 0 | 30 |
| December | 310 | 150 | 0 | 0 | 31 |
| ***TOTAL*** | 3680 | | 0 | | |

Submitted Electronically