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 # 35735
Name: House, Dustin
Address 1: 5627 WOODLAND RD
Address 2:
City: SHAWNEE State: KS Zip: 66218 + 9046
Contact Person: Dustin House
Phone: (913) 748-5467
Lease Name: CHASE
Well Number: I-10

API No.: 15-059-26881-00-00
Permit No: E24623.6
Reporting Year: 2020
(January 1 to December 31)

____ - ____ - NW - NW Sec. 33 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4664 feet from ☐ N / ☑ S Line of Section
4667 feet from ☑ E / ☐ W Line of Section
County: Franklin

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: 600 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 75 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	0	0			0
February	0	0			0
March	60	600			31
April	58	600			30
May	60	600			31
June	58	600			30
July	60	600			31
August	60	600			31
September	58	600			30
October	60	600			31
November	0	0			0
December	0	0			0
TOTAL	474		0		

Submitted Electronically