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 # 35069
Name: Kansas City Oil, LLC
Address 1: P.O. BOX 14292
Address 2:
City: PARKVILLE State: MO Zip: 64152 + 7292
Contact Person: James Fisher
Phone: (785) 766-0288
Lease Name: BLAKELY
Well Number: EOR1

API No.: 15-121-31444-00-00
Permit No: E32678.1
Reporting Year: 2020
(January 1 to December 31)

____ - SW - NW - NW Sec. 5 Twp. 17 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4220 feet from ☐ N / ☑ S Line of Section
5081 feet from ☑ E / ☐ W Line of Section
County: Miami

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: none mg/l Specific Gravity: 28 Additives: none
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: peru
Maximum Authorized Injection Rate: 50 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	50	0	0	31
February	0	50	0	0	28
March	0	50	0	0	31
April	0	50	0	0	30
May	0	50	0	0	31
June	0	50	0	0	30
July	0	50	0	0	31
August	0	50	0	0	31
September	0	50	0	0	30
October	0	50	0	0	31
November	0	50	0	0	30
December	0	50	0	0	31
TOTAL	0		0		

Submitted Electronically