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 # 34036
Name: Leis Oil Services, LLC
Address 1: 1410 150TH RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 5415
Contact Person: Matt Leis
Phone: (620) 212-0752
Lease Name: ALEXANDER V
Well Number: W 5

API No.: 15-207-01385-00-00
Permit No: E19162.1
Reporting Year: 2021
(January 1 to December 31)

____ - NE - SW - NW Sec. 18 Twp. 24 S. R. 16 ☑ E ☐ W
(Q/Q/Q/Q)
3547 feet from ☐ N / ☑ S Line of Section
4459 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: 600 psi Injection Zone: SQUIRREL SAND
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	775	450			31
February	700	450			28
March	775	450			31
April					
May					
June					
July					
August					
September					
October					
November					
December					
TOTAL	2250		0		

Submitted Electronically