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 # 3860
Name: J. M. Oil Company, Inc.
Address 1: 12636 WALMER ST.
Address 2:
City: OVERLAND PK State: KS Zip: 66209 + 3208
Contact Person: Jan L. McClure
Phone: ( 913 ) 271-5147
Lease Name: KOENIG
Well Number: 17

API No.: 15-207-21431-00-01
Permit No: E26436.1
Reporting Year: 2021
*(January 1 to December 31)*

____ - SE - NW - NW Sec. 5 Twp. 25 S. R. 16 ☑ E ☐ W
*(Q/Q/Q/Q)*
4604 feet from ☐ N / ☑ S Line of Section
4592 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: 32500 mg/l Specific Gravity: 23.6 Additives:
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 350 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 120 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 2 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 800 | 50 | 0 | | 21 |
| February | 800 | 50 | 0 | | 18 |
| March | 800 | 50 | 0 | | 26 |
| April | 900 | 50 | 0 | | 28 |
| May | 900 | 50 | 0 | | 31 |
| June | 1000 | 50 | 0 | | 30 |
| July | 1000 | 50 | 0 | | 26 |
| August | 1100 | 50 | 0 | | 26 |
| September | 1200 | 50 | 0 | | 30 |
| October | 1100 | 50 | 0 | | 31 |
| November | 900 | 50 | 0 | | 28 |
| December | 900 | 50 | 0 | | 29 |
| ***TOTAL*** | 11400 | | 0 | | |

Submitted Electronically