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 # 4252
Name: Kahan and Associates, Inc
Address 1: PO BOX 700780
Address 2:
City: TULSA State: OK Zip: 74170 + 0780
Contact Person: Donna Woodruff
Phone: ( 918 ) 492-9797
Lease Name: SABIN CD
Well Number: 5

API No.: 15-155-01486-00-01
Permit No: D17964.0
Reporting Year: 2021
*(January 1 to December 31)*

____ - NW - NE - NE Sec. 11 Twp. 23 S. R. 4 ☐ E ☑ W
*(Q/Q/Q/Q)*
4620 feet from ☐ N / ☑ S Line of Section
990 feet from ☑ E / ☐ W Line of Section
County: Reno

**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: 0 psi Injection Zone: Mississippian & Hunton Lime
Maximum Authorized Injection Rate: 3000 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

**III.**

| Month: | Total Fluid Injected BBL | Maximum Fluid Pressure | Total Gas Injected MCF | Maximum Gas Pressure | # Days of Injection |
|---|---|---|---|---|---|
| January | 81836 | 0 | 0 | 0 | 31 |
| February | 75045 | 0 | 0 | 0 | 28 |
| March | 80752 | 0 | 0 | 0 | 31 |
| April | 77030 | 0 | 0 | 0 | 30 |
| May | 88967 | 0 | 0 | 0 | 31 |
| June | 82796 | 0 | 0 | 0 | 30 |
| July | 88965 | 0 | 0 | 0 | 31 |
| August | 88508 | 0 | 0 | 0 | 31 |
| September | 85994 | 0 | 0 | 0 | 30 |
| October | 88861 | 0 | 0 | 0 | 31 |
| November | 82075 | 0 | 0 | 0 | 30 |
| December | 91545 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 1012374 | | 0 | | |

Submitted Electronically