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 # 3288
Name: Jody Oil & Gas Corporation
Address 1: PO BOX 422
Address 2:
City: ATTICA State: KS Zip: 67009 + 0422
Contact Person: Derek Newberry
Phone: (620) 254-7251
Lease Name: YATES
Well Number: 1

API No.: 15-077-00144-00-01
Permit No: D27827.0
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NW - SE Sec. 18 Twp. 31 S. R. 8 ☐ E ☑ W
(Q/Q/Q/Q)
2268 feet from ☐ N / ☑ S Line of Section
1648 feet from ☑ E / ☐ W Line of Section
County: Harper

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: ARBUCKLE
Maximum Authorized Injection Rate: 2000 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	20000				31
February	18500				28
March	20500				31
April	20500				30
May	21000				31
June	20000				30
July	16000				31
August	20000				31
September	18000				30
October	15000				31
November	20000				30
December	20500				31
TOTAL	230000		0		

Submitted Electronically