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 # 30823
Name: Clark, Daryl
Address 1: 240 W G ST
Address 2:
City: PHILLIPSBURG State: KS Zip: 67661 + 2006
Contact Person: Terry Kipp
Phone: (785) 543-5727
Lease Name: CLARK
Well Number: 3

API No.: 15-147-20393-00-00
Permit No: D22532.0
Reporting Year: 2021
(January 1 to December 31)

____ - SW - NW - SW Sec. 1 Twp. 4 S. R. 20 ☐ E ☑ W
(Q/Q/Q/Q)
1902 feet from ☐ N / ☑ S Line of Section
5258 feet from ☑ E / ☐ W Line of Section
County: Phillips

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: CEDAR HILLS
Maximum Authorized Injection Rate: 110 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	0	0	0	0
February	0	0	0	0	0
March	0	0	0	0	0
April	0	0	0	0	0
May	0	0	0	0	0
June	0	0	0	0	0
July	0	0	0	0	0
August	0	0	0	0	0
September	0	0	0	0	0
October	0	0	0	0	0
November	0	0	0	0	0
December	100	0	0	0	10
TOTAL	100		0		

Submitted Electronically