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 # 35564
Name: Owens Oil Company, LLC
Address 1: 1274 202ND RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 5411
Contact Person: Jody Owens
Phone: (620) 496-6804
Lease Name: SCOTT
Well Number: 3

API No.: 15-207-02129-00-01
Permit No: E19332.1
Reporting Year: 2021
(January 1 to December 31)

SW - NW - SW - NE Sec. 34 Twp. 23 S. R. 14 ☑ E ☐ W
(Q/Q/Q/Q)
3440 feet from ☐ N / ☑ S Line of Section
2464 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: 0 psi Injection Zone: Mississippi
Maximum Authorized Injection Rate: 20 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					0
February					0
March					0
April					0
May					0
June					0
July					0
August	5	0	0	0	31
September	5	0	0	0	30
October	5	0	0	0	31
November	5	0	0	0	30
December	5	0	0	0	31
TOTAL	25		0		

Submitted Electronically