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 # 34840
Name: Clark Oil, LLC
Address 1: 24496 PLEASANT VALLEY RD.
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 8409
Contact Person: Gary Clark
Phone: (785) 979-2402
Lease Name: FOLKS
Well Number: F-2

API No.: 15-121-23650-00-01
Permit No: E26112.2
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NW - SE Sec. 2 Twp. 16 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
1971 feet from ☐ N / ☑ S Line of Section
1328 feet from ☑ E / ☐ W Line of Section
County: Miami

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: 350 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 100 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	465	325	0	0	31
February	420	325	0	0	28
March	465	325	0	0	31
April	450	325	0	0	30
May	465	325	0	0	31
June	450	325	0	0	30
July	465	325	0	0	31
August	465	325	0	0	31
September	450	325	0	0	30
October	465	325	0	0	31
November	450	325	0	0	30
December	465	325	0	0	31
TOTAL	5475		0		

Submitted Electronically