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 # 35735
Name: House, Dustin
Address 1: 5627 WOODLAND RD
Address 2:
City: SHAWNEE State: KS Zip: 66218 + 9046
Contact Person: Dustin House
Phone: (913) 748-5467
Lease Name: CHASE
Well Number: I-4

API No.: 15-059-26879-00-00
Permit No: E24623.8
Reporting Year: 2021
(January 1 to December 31)

____ - NE - NW - NW Sec. 33 Twp. 17 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
4960 feet from ☐ N / ☑ S Line of Section
4010 feet from ☑ E / ☐ W Line of Section
County: Franklin

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: 600 psi Injection Zone: SQUIRREL SAND
Maximum Authorized Injection Rate: 75 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	55				31
February	49				28
March	55				31
April	53				30
May	55				31
June	53				30
July	55				31
August	55				31
September	53				30
October	55				31
November	53				30
December	55				31
TOTAL	646		0		

Submitted Electronically