

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 # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

Lease Name: _____

Well Number: _____

API No.: _____

Permit No.: _____

Reporting Year: _____

(January 1 to December 31)

____ - ____ - ____ - ____ Sec. ____ Twp. ____ S. R. ____ E W
(a/a/a/a)_____ feet from N / S Line of Section_____ feet from E / W Line of Section

County: _____

I. Injection Fluid:Type (Pick one): Fresh Water Treated Brine Untreated Brine Water/BrineSource: 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: _____ psi Injection Zone: _____

Maximum Authorized Injection Rate: _____ 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	_____	_____	_____	_____	_____
	February	_____	_____	_____	_____	_____
	March	_____	_____	_____	_____	_____
	April	_____	_____	_____	_____	_____
	May	_____	_____	_____	_____	_____
	June	_____	_____	_____	_____	_____
	July	_____	_____	_____	_____	_____
	August	_____	_____	_____	_____	_____
	September	_____	_____	_____	_____	_____
	October	_____	_____	_____	_____	_____
	November	_____	_____	_____	_____	_____
	December	_____	_____	_____	_____	_____
	TOTAL	_____	_____	_____	_____	_____

Submitted Electronically

Summary of Changes

Lease Name and Number: EWING J R 4

Doc ID: 1631486

Correction Number: 1

Field Name	Previous Value	New Value
Date Accepted	03/01/2022	03/03/2022
Number of Days of Injection, February	16	28
Maximum Fluid Pressure, April	500	1000
Maximum Fluid Pressure, August	500	1000
Maximum Fluid Pressure, December	500	1000
Maximum Fluid Pressure, February	500	1000
Maximum Fluid Pressure, January	500	1000
Maximum Fluid Pressure, July	500	1000
Maximum Fluid Pressure, June	500	1000
Maximum Fluid Pressure, March	500	1000
Maximum Fluid Pressure, May	500	1000
Maximum Fluid Pressure, November	500	1000

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Maximum Fluid Pressure, October	500	1000
Maximum Fluid Pressure, September	500	1000
Total BBL Injected	60005	88122
Total BBL Injected in April	4875	7500
Total BBL Injected in August	4940	7516
Total BBL Injected in December	6590	8174
Total BBL Injected in February	2255	5186
Total BBL Injected in January	7450	7897
Total BBL Injected in July	5085	7391
Total BBL Injected in June	5045	7708
Total BBL Injected in March	3945	7600
Total BBL Injected in May	4780	7168
Total BBL Injected in November	6150	7342

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Total BBL Injected in October	3905	7374
Total BBL Injected in September	4985	7266