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 # 33542
Name: Mohr, Steve
Address 1: 9005 W 61ST N
Address 2:
City: MAIZE State: KS Zip: 67101 + 9066
Contact Person: steve
Phone: ( 316 ) 258-2373
Lease Name: MONROE A
Well Number: 1

API No.: 15-019-21766-00-02
Permit No: E30221.1
Reporting Year: 2021
*(January 1 to December 31)*

SE - SW - SW - SW Sec. 19 Twp. 32 S. R. 13 ☑ E ☐ W
*(Q/Q/Q/Q)*
212 feet from ☐ N / ☑ S Line of Section
4808 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

**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: 200 psi Injection Zone: WEISER SAND
Maximum Authorized Injection Rate: 200 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 | | | | |
| February | 0 | | | | |
| March | 0 | | | | |
| April | 0 | | | | |
| May | 250 | 100 | | | 25 |
| June | 300 | 100 | | | 30 |
| July | 300 | 100 | | | 31 |
| August | 300 | 100 | | | 29 |
| September | 275 | 100 | | | 30 |
| October | 300 | 100 | | | 30 |
| November | 300 | 100 | | | 29 |
| December | 250 | 100 | | | 29 |
| ***TOTAL*** | 2275 | | 0 | | |

Submitted Electronically