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 # 5056
Name: F. G. Holl Company L.L.C.
Address 1: 9431 E CENTRAL STE 100
Address 2:
City: WICHITA State: KS Zip: 67206 + 2563
Contact Person: Loveness Mpanje
Phone: ( 316 ) 684-8481
Lease Name: JOHNSON "A" SWD
Well Number: 2-9

API No.: 15-007-20260-00-01
Permit No: D28942.0
Reporting Year: 2022
*(January 1 to December 31)*

____ - ____ - NE - NE Sec. 9 Twp. 30 S. R. 14 ☐ E ☑ W
*(Q/Q/Q/Q)*
4637 feet from ☐ N / ☑ S Line of Section
612 feet from ☑ E / ☐ W Line of Section
County: Barber

**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: ARBUCKLE
Maximum Authorized Injection Rate: 4000 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 | 195 | 0 | 0 | 0 | 13 |
| February | 0 | 0 | 0 | 0 | 0 |
| March | 0 | 0 | 0 | 0 | 0 |
| April | 270 | 0 | 0 | 0 | 18 |
| May | 465 | 0 | 0 | 0 | 31 |
| June | 120 | 0 | 0 | 0 | 8 |
| July | 465 | 0 | 0 | 0 | 31 |
| August | 285 | 0 | 0 | 0 | 19 |
| September | 30 | 0 | 0 | 0 | 2 |
| October | 465 | 0 | 0 | 0 | 31 |
| November | 450 | 0 | 0 | 0 | 30 |
| December | 465 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 3210 | | 0 | | |

Submitted Electronically