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 # 34303
Name: Jordan Oil Management Inc.
Address 1: PO Box 152
Address 2:
City: Haysville State: KS Zip: 67060 + 0642
Contact Person: Jason
Phone: (620) 440-0170
Lease Name: WAIT
Well Number: 4

API No.: 15-015-20140-00-01
Permit No: D19825.0
Reporting Year: 2022
(January 1 to December 31)

____ - SE - NW - SW Sec. 3 Twp. 26 S. R. 3 ☑ E ☐ W
(Q/Q/Q/Q)
1536 feet from ☐ N / ☑ S Line of Section
4172 feet from ☑ E / ☐ W Line of Section
County: Butler

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: 1600 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	9800	0	0	0	31
February	9500	0	0	0	28
March	9900	0	0	0	31
April	9680	0	0	0	30
May	9950	0	0	0	31
June	9400	0	0	0	30
July	9400	0	0	0	31
August	9550	0	0	0	31
September	9400	0	0	0	30
October	9800	0	0	0	31
November	9600	0	0	0	30
December	9750	0	0	0	31
TOTAL	115730		0		

Submitted Electronically