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 # 35002
Name: DGH Oil, LLC
Address 1: PO BOX 187
Address 2:
City: LOGAN State: KS Zip: 67646 + 0187
Contact Person: Theresa Shellito
Phone: ( 785 ) 689-4816
Lease Name: BIRD
Well Number: 16

API No.: 15-163-23286-00-01
Permit No: E27650.2
Reporting Year: 2022
*(January 1 to December 31)*

____ - ____ - NE - NW Sec. 30 Twp. 8 S. R. 17 ☐ E ☑ W
*(Q/Q/Q/Q)*
4670 feet from ☐ N / ☑ S Line of Section
3352 feet from ☑ E / ☐ W Line of Section
County: Rooks

**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: 250 psi Injection Zone: LANSING-KANSAS CITY,TORONTO
Maximum Authorized Injection Rate: 1000 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 | 50 | 0 | 0 | | 1 |
| February | 50 | 0 | 0 | | 1 |
| March | 50 | 0 | 0 | | 1 |
| April | 50 | 0 | 0 | | 1 |
| May | 50 | 0 | 0 | | 1 |
| June | 50 | 0 | 0 | | 1 |
| July | 50 | 0 | 0 | | 1 |
| August | 50 | 0 | 0 | | 1 |
| September | 50 | 0 | 0 | | 1 |
| October | 50 | 0 | 0 | | 1 |
| November | 50 | 0 | 0 | | 1 |
| December | 50 | 0 | 0 | | 1 |
| ***TOTAL*** | 600 | | 0 | | |

Submitted Electronically