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 # 6931
Name: Bowman Oil Company, a General Partnership
Address 1: 805 CODELL RD
Address 2:
City: CODELL State: KS Zip: 67663 + 8500
Contact Person: Michael W Bowman
Phone: (785) 434-2286
Lease Name: STACKHOUSE OLD
Well Number: 5

API No.: 15-051-02523-00-02
Permit No: D19303.0
Reporting Year: 2022
(January 1 to December 31)

____ - SE - SW - NE Sec. 23 Twp. 12 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
2849 feet from ☐ N / ☑ S Line of Section
1833 feet from ☑ E / ☐ W Line of Section
County: Ellis

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: GRANIT WASH
Maximum Authorized Injection Rate: 900 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	14221				31
February	12846				28
March	14163				31
April	13763				30
May	13844				31
June	12893				30
July	13322				31
August	13322				31
September	12893				30
October	13322				31
November	12893				30
December	13322				31
TOTAL	160804		0		

Submitted Electronically