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 # 6804
Name: Lachenmayr Oil LLC
Address 1: PO BOX 526
Address 2:
City: NEWTON State: KS Zip: 67114 + 0526
Contact Person: JL
Phone: (316) 284-1991
Lease Name: DEFOREST B
Well Number: 5

API No.: 15-115-20764-00-00
Permit No: D20532.0
Reporting Year: 2022
(January 1 to December 31)

NE - NW - NE - NW Sec. 28 Twp. 21 S. R. 4 ☑ E ☐ W
(Q/Q/Q/Q)
5098 feet from ☐ N / ☑ S Line of Section
3316 feet from ☑ E / ☐ W Line of Section
County: Marion

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: VIOLA
Maximum Authorized Injection Rate: 3000 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	17375	0	0	0	31
February	15250	0	0	0	28
March	18416	0	0	0	31
April	15459	0	0	0	30
May	13750	0	0	0	31
June	14917	0	0	0	30
July	13333	0	0	0	31
August	14667	0	0	0	31
September	12750	0	0	0	30
October	17000	0	0	0	31
November	7416	0	0	0	30
December	17250	0	0	0	31
TOTAL	177583		0		

Submitted Electronically