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 # 31327
Name: Pauley, Gary dba Pauley Oil
Address 1: 314 5TH ST
Address 2:
City: CLAFLIN State: KS Zip: 67525 + 8901
Contact Person: Gary Pauley
Phone: (785) 252-8024
Lease Name: SITTNER
Well Number: 3

API No.: 15-159-19041-00-01
Permit No: D22183.0
Reporting Year: 2022
(January 1 to December 31)

____ - NW - SE - NE Sec. 4 Twp. 19 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
3636 feet from ☐ N / ☑ S Line of Section
783 feet from ☑ E / ☐ W Line of Section
County: Rice

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: 220 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	4800	0			31
February	4000	0			28
March	4900	0			31
April	4700	0			30
May	4600	0			31
June	4100	0			30
July	4600	0			31
August	4500	0			31
September	4200	0			30
October	4800	0			31
November	4600	0			30
December	4600	0			31
TOTAL	54400		0		

Submitted Electronically