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 # 5970
Name: Elmore, John A. and Patricia R.
Address 1: 776 HWY 99
Address 2:
City: SEDAN State: KS Zip: 67361 + 8564
Contact Person: John A. Elmore
Phone: (620) 249-2519
Lease Name: WALTER
Well Number: 2

API No.: 15-019-22268-00-01
Permit No: E24568.1
Reporting Year: 2022
(January 1 to December 31)

NW - NE - SW - SW Sec. 14 Twp. 34 S. R. 11 ☑ E ☐ W
(Q/Q/Q/Q)
1017 feet from ☐ N / ☑ S Line of Section
4635 feet from ☑ E / ☐ W Line of Section
County: Chautauqua

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: 175 psi Injection Zone: WAYSIDE SAND
Maximum Authorized Injection Rate: 200 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	1550	50			31
February	1400	50			28
March	1550	50			31
April	1500	50			30
May	1550	50			31
June	1500	50			30
July	1550	50			31
August	1550	50			31
September	1500	50			30
October	1550	50			31
November	1500	50			30
December	1550	50			31
TOTAL	18250		0		

Submitted Electronically