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 # 31569
Name: Bach, Jason dba Bach Oil Production
Address 1: PO BOX 723
Address 2:
City: ALMA State: NE Zip: 68920 + 0723
Contact Person: Julie Dobias
Phone: ( 308 ) 928-8920
Lease Name: WILLIAM G KENT
Well Number: 4

API No.: 15-147-20259-00-00
Permit No: D15104.0
Reporting Year: 2022
*(January 1 to December 31)*

____ - NE - SW - NE Sec. 22 Twp. 1 S. R. 18 ☐ E ☑ W
*(Q/Q/Q/Q)*
3505 feet from ☐ N / ☑ S Line of Section
1656 feet from ☑ E / ☐ W Line of Section
County: Phillips

**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: CEDAR HILLS
Maximum Authorized Injection Rate: 80 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 | 600 | 0 | 0 | 0 | 31 |
| February | 550 | 0 | 0 | 0 | 28 |
| March | 615 | 0 | 0 | 0 | 31 |
| April | 615 | 0 | 0 | 0 | 30 |
| May | 600 | 0 | 0 | 0 | 31 |
| June | 615 | 0 | 0 | 0 | 30 |
| July | 615 | 0 | 0 | 0 | 31 |
| August | 615 | 0 | 0 | 0 | 31 |
| September | 600 | 0 | 0 | 0 | 30 |
| October | 600 | 0 | 0 | 0 | 31 |
| November | 550 | 0 | 0 | 0 | 30 |
| December | 600 | 0 | 0 | 0 | 31 |
| ***TOTAL*** | 7175 | | 0 | | |

Submitted Electronically