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 # 5217
Name: Koehn, Radell W. and Austin Koehn & Morgan Koehn
Address 1: 1977 MOCCASIN RD
Address 2:
City: GALVA State: KS Zip: 67443 + 8021
Contact Person: Radell Koehn
Phone: (620) 654-3872
Lease Name: WEDEL B
Well Number: 2

API No.: 15-113-01084-00-01
Permit No: E01295.1
Reporting Year: 2022
(January 1 to December 31)

____ - NE - NW - NE Sec. 7 Twp. 19 S. R. 1 ☐ E ☑ W
(Q/Q/Q/Q)
4939 feet from ☐ N / ☑ S Line of Section
1747 feet from ☑ E / ☐ W Line of Section
County: McPherson

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: 400 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 300 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	8975				31
February	8090				28
March	8972				31
April	8699				30
May	8965				31
June	8700				30
July	8962				31
August	8967				31
September	8692				30
October	8980				31
November	8665				30
December	8977				31
TOTAL	105644		0		

Submitted Electronically