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 # 31813
Name: Becker, Steve A. dba A & A Well Service
Address 1: 4500 CONNECTICUT RD
Address 2:
City: ELSMORE State: KS Zip: 66732 + 4069
Contact Person: Steve Becker
Phone: ( 620 ) 754-3788
Lease Name: J. K. CORP
Well Number: 24-18

API No.: 15-011-22203-00-01
Permit No: E24310.4
Reporting Year: 2022
*(January 1 to December 31)*

____ - NE - NW - SW Sec. 24 Twp. 26 S. R. 21 ☑ E ☐ W
*(Q/Q/Q/Q)*
2569 feet from ☐ N / ☑ S Line of Section
4070 feet from ☑ E / ☐ W Line of Section
County: Bourbon

**I. Injection Fluid:**

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
*(Attach water analysis, if available)*

**II. Well Data:**

Maximum Authorized Injection Pressure: 690 psi Injection Zone: Bartleville
Maximum Authorized Injection Rate: 320 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 | 650 | 600 | 0 | 0 | 31 |
| February | 690 | 600 | 0 | 0 | 28 |
| March | 700 | 600 | 0 | 0 | 31 |
| April | 720 | 600 | 0 | 0 | 30 |
| May | 780 | 600 | 0 | 0 | 31 |
| June | 750 | 600 | 0 | 0 | 30 |
| July | 790 | 600 | 0 | 0 | 31 |
| August | 750 | 600 | 0 | 0 | 31 |
| September | 745 | 600 | 0 | 0 | 30 |
| October | 750 | 600 | 0 | 0 | 31 |
| November | 735 | 600 | 0 | 0 | 30 |
| December | 735 | 600 | 0 | 0 | 31 |
| ***TOTAL*** | 8795 | | 0 | | |

Submitted Electronically