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 # 34339
Name: D & Z Exploration, Inc.
Address 1: 900 N ELM ST.
Address 2: PO BOX 159
City: ST ELMO State: IL Zip: 62458 + 0159
Contact Person: Zane Belden
Phone: ( 618 ) 829-3274
Lease Name: EAST GORDON
Well Number: #W5

API No.: 15-091-24316-00-00
Permit No: E31694.16
Reporting Year: 2022
*(January 1 to December 31)*

____ - SW - SW - NW Sec. 27 Twp. 14 S. R. 22 ☑ E ☐ W
*(Q/Q/Q/Q)*
3080 feet from ☐ N / ☑ S Line of Section
5263 feet from ☑ E / ☐ W Line of Section
County: Johnson

**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: 650 psi Injection Zone: Bartlesville
Maximum Authorized Injection Rate: 100 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 | 44 | 650 | 0 | 0 | 31 |
| February | 39 | 650 | 0 | 0 | 28 |
| March | 34 | 650 | 0 | 0 | 31 |
| April | 29 | 650 | 0 | 0 | 30 |
| May | 28 | 650 | 0 | 0 | 31 |
| June | 22 | 650 | 0 | 0 | 30 |
| July | 21 | 650 | 0 | 0 | 31 |
| August | 20 | 650 | 0 | 0 | 31 |
| September | 32 | 650 | 0 | 0 | 30 |
| October | 23 | 650 | 0 | 0 | 31 |
| November | 39 | 650 | 0 | 0 | 30 |
| December | 46 | 650 | 0 | 0 | 31 |
| ***TOTAL*** | 377 | | 0 | | |

Submitted Electronically