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 # 6227
Name: Kraft Oil Company LLC
Address 1: 471 Iris Rd
Address 2:
City: GRIDLEY State: KS Zip: 66852 + 9253
Contact Person: Thomas A Kraft
Phone: (620) 437-6691
Lease Name: WEIDE
Well Number: 1 W I

API No.: 15-207-19836-00-01
Permit No: E13047.1
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NW - SE Sec. 31 Twp. 23 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
1429 feet from ☐ N / ☑ S Line of Section
2361 feet from ☑ E / ☐ W Line of Section
County: Woodson

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: 500 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 100 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 1 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	1400	175			31
February	1300	175			28
March	1400	175			31
April	1350	175			30
May	1400	175			31
June	1350	175			30
July	1400	175			31
August	1400	175			31
September	1350	175			30
October	1400	175			31
November	1350	175			30
December	1400	175			31
TOTAL	16500		0		

Submitted Electronically