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 # 8541
Name: Petex, Inc.
Address 1: 4175 S FR 193
Address 2:
City: ROGERSVILLE State: MO Zip: 65742 + 7217
Contact Person: Larry Childress
Phone: ( 417 ) 8871225
Lease Name: JONES
Well Number: 2

API No.: 15-063-20194-00-01
Permit No: D17180.0
Reporting Year: 2023
*(January 1 to December 31)*

____ - ____ - SE - SE Sec. 18 Twp. 11 S. R. 31 ☐ E ☑ W
*(Q/Q/Q/Q)*
654 feet from ☐ N / ☑ S Line of Section
797 feet from ☑ E / ☐ W Line of Section
County: Gove

**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: 500 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 | 900 | | | | 31 |
| February | 900 | | | | 28 |
| March | 900 | | | | 31 |
| April | 900 | | | | 30 |
| May | 900 | | | | 31 |
| June | 900 | | | | 30 |
| July | 900 | | | | 31 |
| August | 900 | | | | 31 |
| September | 900 | | | | 30 |
| October | 900 | | | | 31 |
| November | 900 | | | | 30 |
| December | 900 | | | | 31 |
| ***TOTAL*** | 10800 | | 0 | | |

Submitted Electronically