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 # 32079
Name: Leis, John E.
Address 1: 1410 150th RD
Address 2:
City: YATES CENTER State: KS Zip: 66783 + 9111
Contact Person: Matt Leis
Phone: (620) 212-0752
Lease Name: COOL
Well Number: 10

API No.: 15-207-26238-00-00
Permit No: E24744.7
Reporting Year: 2023
(January 1 to December 31)

SE - NW - NW - NE Sec. 24 Twp. 24 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
490 feet from ☑ N / ☐ S Line of Section
2000 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: SQUIRREL SAND
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	52	250			31
February	49	250			28
March	52	250			31
April	50	250			30
May	52	250			31
June	50	250			30
July	52	250			31
August	52	250			31
September	50	250			30
October	52	250			31
November	50	250			30
December	52	250			31
TOTAL	613		0		

Submitted Electronically