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 Leiis
Phone: (620) 212-0752
Lease Name: COOL
Well Number: 9

API No.: 15-207-25693-00-00
Permit No: E24744.6
Reporting Year: 2023
(January 1 to December 31)

____ - SE - NW - NE Sec. 24 Twp. 24 S. R. 15 ☑ E ☐ W
(Q/Q/Q/Q)
4536 feet from ☐ N / ☑ S Line of Section
1996 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	400			31
February	46	400			28
March	52	400			31
April	50	400			30
May	52	400			31
June	50	400			30
July	52	400			31
August	52	400			31
September	50	400			30
October	52	400			31
November	50	400			30
December	52	400			31
TOTAL	610		0		

Submitted Electronically