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 # 33095
Name: Oil Partners, LLC
Address 1: 1628 OVERLOOK DRIVE
Address 2: PO BOX 1851
City: SALINA State: KS Zip: 67401 + 1851
Contact Person: MORRIE SODERBERG
Phone: (785) 452-0061
Lease Name: EKSTROM
Well Number: 1

API No.: 15-169-30021-00-01
Permit No: D12771.0
Reporting Year: 2023
(January 1 to December 31)

____ - E2 - NE - NW Sec. 26 Twp. 15 S. R. 2 ☐ E ☑ W
(Q/Q/Q/Q)
4612 feet from ☐ N / ☑ S Line of Section
2952 feet from ☑ E / ☐ W Line of Section
County: Saline

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: 300 psi Injection Zone: MISSISSIPPIAN
Maximum Authorized Injection Rate: 600 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	8029	0	0	0	31
February	7140	0	0	0	28
March	7750	0	0	0	31
April	8220	0	0	0	30
May	8246	0	0	0	31
June	7920	0	0	0	30
July	8060	0	0	0	31
August	5980	0	0	0	23
September	0	0	0	0	0
October	4680	0	0	0	18
November	7950	0	0	0	30
December	8215	0	0	0	31
TOTAL	82190		0		

Submitted Electronically