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 # 6677
Name: Sandlin Oil Corporation
Address 1: 500 8TH ST STE C-1 & C-2
Address 2: PO BOX 430
City: DACONO State: CO Zip: 80514 + 0430
Contact Person: Kathie Sandlin
Phone: (303) 292-3313
Lease Name: REEDER
Well Number: 1

API No.: 15-051-04411-00-01
Permit No: D30339.0
Reporting Year: 2023
(January 1 to December 31)

____ - NE - NE - NW Sec. 22 Twp. 12 S. R. 18 ☐ E ☑ W
(Q/Q/Q/Q)
4950 feet from ☐ N / ☑ S Line of Section
2970 feet from ☑ E / ☐ W Line of Section
County: Ellis

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	8255	0	0	0	31
February	7170	0	0	0	28
March	8260	0	0	0	31
April	8594	0	0	0	30
May	8262	0	0	0	31
June	7699	0	0	0	30
July	8241	0	0	0	31
August	8567	0	0	0	31
September	7722	0	0	0	30
October	7483	0	0	0	27
November	8619	0	0	0	30
December	8582	0	0	0	31
TOTAL	97454		0		

Submitted Electronically