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 # 3882
Name: Samuel Gary Jr. & Associates, Inc.
Address 1: 1515 WYNKOOP, STE 700
Address 2:
City: DENVER State: CO Zip: 80202 + 2062
Contact Person: STEPHANIE DECKER
Phone: (303) 831-4673
Lease Name: STRAMEL
Well Number: 2

API No.: 15-165-21512-00-01
Permit No: D26136.0
Reporting Year: 2023
(January 1 to December 31)

____ - SE - NE - SW Sec. 1 Twp. 16 S. R. 17 ☐ E ☑ W
(Q/Q/Q/Q)
1506 feet from ☐ N / ☑ S Line of Section
3078 feet from ☑ E / ☐ W Line of Section
County: Rush

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: ARBUCKLE
Maximum Authorized Injection Rate: 5000 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	3529				31
February	3187				28
March	3528				31
April	3415				30
May	3528				31
June	3384				30
July	3370				31
August	3370				31
September	3261				30
October	3370				31
November	3261				30
December	3370				31
TOTAL	40573		0		

Submitted Electronically