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 # 33065
Name: Hoehn Oil LLC
Address 1: 40971 W 247TH RD
Address 2:
City: WELLSVILLE State: KS Zip: 66092 + 4047
Contact Person: Victoria Davis
Phone: (913) 908-5976
Lease Name: W ANDERSON
Well Number: 23

API No.: 15-059-23308-00-01
Permit No: E26642.1
Reporting Year: 2023
(January 1 to December 31)

____ - NE - SW - SW Sec. 31 Twp. 16 S. R. 21 ☑ E ☐ W
(Q/Q/Q/Q)
1295 feet from ☐ N / ☑ S Line of Section
4000 feet from ☑ E / ☐ W Line of Section
County: Franklin

I. Injection Fluid:

Type *(Pick one)*: ☐ Fresh Water ☐ Treated Brine ☑ Untreated Brine ☐ Water/Brine
Source: ☑ Produced Water ☐ Other *(Attach list)*
Quality: Total Dissolved Solids: N/A mg/l Specific Gravity: N/A Additives: N/A
(Attach water analysis, if available)

II. Well Data:

Maximum Authorized Injection Pressure: 500 psi Injection Zone: Squirrel
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	600	375	0	0	31
February	550	375	0	0	28
March	610	375	0	0	31
April	580	375	0	0	30
May	615	375	0	0	31
June	590	375	0	0	30
July	600	375	0	0	31
August	605	375	0	0	31
September	585	375	0	0	30
October	600	375	0	0	31
November	590	375	0	0	30
December	600	375	0	0	31
TOTAL	7125		0		

Submitted Electronically