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 # 9957
Name: Thomason Petroleum, Inc
Address 1: 1413 WASHINGTON CIR
Address 2: PO BOX 875
City: HAYS State: KS Zip: 67601 + 0875
Contact Person: Steven Thomason
Phone: (785) 625-9045
Lease Name: JOHNSON
Well Number: 31-16

API No.: 15-155-20913-00-00
Permit No: D22357.0
Reporting Year: 2023
(January 1 to December 31)

NW - NW - SE - SE Sec. 31 Twp. 23 S. R. 10 ☐ E ☑ W
(Q/Q/Q/Q)
1155 feet from ☐ N / ☑ S Line of Section
1237 feet from ☑ E / ☐ W Line of Section
County: Reno

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: 2000 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	13950	1800	0	0	31
February	12600	1800	0	0	28
March	13950	1800	0	0	31
April	13000	1800	0	0	30
May	13950	1800	0	0	31
June	13050	1800	0	0	30
July	13950	1800	0	0	31
August	13950	1800	0	0	31
September	13500	1800	0	0	30
October	13950	1800	0	0	31
November	13500	1800	0	0	30
December	13950	1800	0	0	31
TOTAL	163300		0		

Submitted Electronically