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 # 35515
Name: AmeriKan Oil, LLC
Address 1: 7040 KS HIGHWAY 7
Address 2:
City: MOUND CITY State: KS Zip: 66056 + 5330
Contact Person: Joe Thyer
Phone: (620) 363-1140
Lease Name: DRAGONSLAYER LLC
Well Number: 37-I

API No.: 15-091-22562-00-00
Permit No: E25485.10
Reporting Year: 2023
(January 1 to December 31)

____ - SW - NE - NW Sec. 29 Twp. 14 S. R. 22 ☑ E ☐ W
(Q/Q/Q/Q)
4184 feet from ☐ N / ☑ S Line of Section
3263 feet from ☑ E / ☐ W Line of Section
County: Johnson

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: 650 psi Injection Zone: BARTLESVILLE
Maximum Authorized Injection Rate: 60 barrels per day
Total Number of Enhanced Recovery Injection Wells Covered by this Permit: 21 *(Include TA's)*

III.

Month:	Total Fluid Injected BBL	Maximum Fluid Pressure	Total Gas Injected MCF	Maximum Gas Pressure	# Days of Injection
January	1659	600			31
February	1660	600			28
March	1669	600			31
April	1699	600			30
May	1682	600			31
June	1678	600			30
July	1667	600			31
August	1687	600			31
September	1670	600			30
October	1665	600			31
November	1646	600			30
December	1661	600			31
TOTAL	20043		0		

Submitted Electronically